Report of the Auditor-General

Audit Office of South Australia

Report 8 of 2024

Managing homelessness services

Government of South Australia

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Delivered to the President of the Legislative Council and the Speaker of the House of Assembly on 29 July 2024 and published on 31 July 2024 under section 38(2) of the *Public Finance and Audit Act 1987*

First Session, Fifty-Fifth Parliament

By authority: T. Foresto, Government Printer, South Australia

2024

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Enquiries about this report should be directed to:

Auditor-General
Audit Office of South Australia
Level 9, 200 Victoria Square
Adelaide SA 5000

ISSN 0815-9157

Government of South Australia
Audit Office of South Australia

Level 9
State Administration Centre
200 Victoria Square
Adelaide SA 5000
Tel +618 8226 9640
ABN 53 327 061 410
enquiries@audit.sa.gov.au
www.audit.sa.gov.au

29 July 2024

President
Legislative Council
Parliament House
ADELAIDE SA 5000

Speaker
House of Assembly
Parliament House
ADELAIDE SA 5000

Dear President and Speaker

Report of the Auditor-General: Report 8 of 2024 *Managing homelessness services*

Under section 31(2) of the *Public Finance and Audit Act 1987* (PFAA), I have conducted a performance audit of the South Australian Housing Trust's management of its specialist homelessness services. The South Australian Housing Trust was responsible for this function at the time of the audit. From 1 July 2024 the function transferred to the Department of Human Services.

I present to each of you my independent assurance report on the findings of the audit. Copies have also been provided to:

- the Treasurer
- the Minster for Human Services.

Audit objective

We assessed whether the South Australian Housing Trust is effectively managing its provision of specialist homelessness services.

My responsibilities

Performance audits conducted under section 31(2) of the PFAA are assurance engagements that assess whether public sector programs or activities are achieving economy, efficiency and effectiveness in using available resources. These engagements conclude on the performance of the programs or activities evaluated against identified criteria.

The Auditor-General's roles and responsibilities in conducting performance audits are set out in the PFAA. Section 31 of the PFAA empowers me to conduct these audits, while sections 37 and 38 outline the reporting arrangements.

The audit was conducted in line with the Standard on Assurance Engagements ASAE 3500 *Performance Engagements*. We complied with the independence and other relevant ethical requirements for assurance engagements.

Acknowledgements

The audit team for this report was Salv Bianco, Philip Rossi, Ken Anderson and Stephen Gladigau.

We appreciate the cooperation given by staff of the South Australian Housing Trust during our audit. We are particularly grateful for their constructive approach and helpful assistance.

Yours sincerely

Andrew Blaskett
Auditor-General

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Audit snapshot – Managing homelessness services

What we reviewed and why

We assessed whether the South Australian Housing Trust (SAHT) effectively manages its provision of specialist homelessness services.

Managing these services effectively is important because the people experiencing homelessness are among the most vulnerable in our community. Homelessness can significantly harm people's health, safety, wellbeing and ability to engage socially and economically.

SAHT funds non-government organisations to provide specialist homelessness services that help clients to find and maintain housing. Demand for these services has recently increased considerably due to the significant pressures on the housing market that make finding affordable housing difficult.

Key facts

71%
of specialist homelessness services clients
did not have their need for long-term housing met
in 2022-23*

SAHT spent
$73 million
on supporting
19,422 South Australians
experiencing homelessness issues in 2022-23

The average number of monthly
specialist homelessness services clients
increased by 9%
between 2019-20 and 2022-23, while SA Government funding for these services decreased in real terms

The average **life expectancy** of people experiencing homelessness is **22 to 33 years less** than people in secure housing*

*Australian Institute of Health and Welfare

What we concluded

While SAHT is progressing some important initiatives to improve its practices and processes, it is not effectively managing its provision of specialist homelessness services and the increased demand for them.

We found gaps in key areas:

Strategic planning for specialist homelessness services does not reflect the current operating environment or targets for measuring success.

No analysis was performed to identify service gaps and determine funding required to support people experiencing or at risk of homelessness.

There is a lack of guidance on how services are to be prioritised in periods of high demand.

There is limited oversight of the way service providers plan to achieve intended outcomes.

Service contract design does not enable effective performance monitoring.

There is limited oversight and reporting on system and service outcomes and performance.

These gaps increase the risk that South Australians experiencing or at risk of homelessness will not receive the support they need to obtain or maintain sustainable housing, and they may experience housing insecurity for longer.

SAHT acknowledged where it needs to improve and we noted during the audit it was taking active steps to address the gaps we identified. This includes implementing an outcomes measurement framework, more governance reporting and a new sector governance group to oversee the specialist homelessness services system.

1 Executive summary

1.1 Introduction

Our performance audit assessed whether the South Australian Housing Trust (SAHT) effectively manages its provision of specialist homelessness services.

It is important for SAHT to effectively manage its specialist homelessness services to meet client needs, achieve targeted outcomes and get value for money in using public funds.

People experiencing homelessness are among the most vulnerable in our community. Homelessness can harm people's health, safety, wellbeing and ability to engage socially and economically. Australian studies have suggested that people who are homeless die on average 22 to 33 years younger than those who are housed.[1]

Specialist homelessness services providers provide a range of services to help people experiencing or at risk of homelessness.

These providers have limited housing and accommodation they can directly provide clients. They work with their clients to find sustainable housing and address issues contributing to their housing insecurity.

On census night in 2021 there were 7,428 people experiencing homelessness in South Australia. Another 5,158 were marginally housed.[2]

To support people experiencing or at risk of homelessness, SAHT funds non-government organisations to provide specialist homelessness services. Expenditure on these services totalled $73 million in 2022-23 and supported 19,422 South Australians.[3]

SAHT has faced many challenges in managing its specialist homelessness services, including that:

- the specialist homelessness services sector is complex, with multiple and varied stakeholders, service providers and service types
- many of the policy levers to prevent or reduce homelessness are not within the direct control and influence of SAHT and its specialist homelessness services providers
- services have had to respond to the rapidly changing housing market and profile of people experiencing or at risk of homelessness.

SAHT also implemented a new alliance model for delivering a range of specialist homelessness services in July 2021, during the challenging COVID-19 pandemic period. This was a significant change in the way services are provided to people experiencing or at risk of homelessness. For instance, it requires SAHT to work in partnership with the specialist homelessness services sector to promote collaboration across the sector, with a common goal of moving to a service system focused on delivering outcomes. SAHT also indicated that under the alliance model:

- it entrusts the expertise of its service partners who have the knowledge and expertise to best align the budget and service provision with the frontline service need

- there are benefits in locating specialist expertise in a different way to the funder to agent models that governments have historically used.

SAHT advised us that the alliance model is still in its foundational phase and that management arrangements in some areas are not yet fully mature.

1.2 Conclusion

We concluded that while SAHT is progressing some important initiatives to improve its practices and processes, it is not effectively managing its provision of specialist homelessness services and the increased demand for them. This is because we found gaps in key areas, including that:

- strategic planning for the services does not reflect the current operating environment, a system-wide approach[a] or measures of success for intended outcomes
- no analysis has been performed on current services and unmet need to identify service gaps and determine funding required to support people experiencing homelessness
- there is a lack of guidance on who the services are intended to support and how they should be prioritised during periods of high demand
- there is limited oversight on how service providers plan to achieve intended outcomes
- the design of service contracts does not enable effective performance monitoring
- there was limited oversight by governing bodies of system and service performance.

SAHT has also performed limited outcomes monitoring to date as it has not had the right data and systems. It is currently implementing an outcomes measurement framework but there is much work to do before it is fully operational.

Given these gaps, SAHT cannot demonstrate that it is effectively:

- identifying and responding to unmet need and service gaps
- managing service providers to ensure they achieve service objectives and outcomes
- measuring and reporting how well specialist homelessness services provided are preventing and reducing homelessness
- ensuring its investments in specialist homelessness services are directed to where they will have the most positive impact.

The gaps in key areas increase the risk that people experiencing or at risk of homelessness will not receive the support they need to obtain sustainable housing. Housing insecurity can have a significant harmful impact on people's health, safety and wellbeing.

[a] The system comprises all specialist homelessness services for the State, and specifically all alliance and directly contracted homelessness services taken together. Section 2.4.4 provides further details.

SAHT recognises where it needs to improve and is taking action to address the gaps we identified, including:

- assessing data requirements for its outcomes measurement framework
- implementing additional reporting to the SAHT Board
- establishing a new sector governance group to oversee the specialist homelessness services system.

Sections 3 to 7 provide further details on our findings.

1.3 Recent development – transfer of function

SAHT was responsible for providing specialist homelessness services at the time of our audit. As a result, this report and its recommendations reflects this SAHT responsibility.

On 1 July 2024 the responsibility for homelessness services transferred to the Department of Human Services. At the time of this report, both agencies were working through what is needed to implement this change.

This report's recommendations should now be considered by the Department of Human Services as part of the arrangements to transition the homelessness services function.

1.4 What we recommended

The SAHT has emphasised to us the importance of the alliance model to enable long-term improvements in outcomes for vulnerable South Australians. We have made a number of findings and recommendations related to alliance arrangements. In doing this, we are not advocating that SAHT abandon the alliance model and its collaborative and partnership-based elements. Rather, we have identified improvements to operational contract management practices over the alliance contracts to provide greater assurance over:

- the expenditure and proper use of public monies by private contractors
- the achievement of service delivery contract objectives and outcomes.

SAHT needs to implement the following key actions to ensure it effectively manages its specialist homelessness services:

- develop a strategic plan for the whole system that sets out an approach for addressing changes in the State's housing market and increasing service demand
- actively identify, monitor and respond to changes in unmet need and service gaps
- provide clear guidance to service providers on how services are to be prioritised and planned, including clearly defining who the services are intended to support
- finalise and fully implement its outcomes measurement framework to ensure system-wide outcomes are effectively measured and monitored

- update service contracts to ensure they reflect relevant and achievable outcomes, and performance measures that consider the current sector operating environment
- actively manage all service contracts to ensure service objectives are being achieved
- provide ongoing and timely reporting to the SAHT Board and Executive on the performance of specialist homelessness services
- ensure the new sector governance group provides ongoing oversight on the performance of the whole specialist homelessness services system, including ensuring consistent service practices and the sharing of learnings and innovation opportunities.

As the drivers of homelessness are multifaceted,[b] preventing or reducing it requires effective consultation and coordination across multiple SA Government agencies. SAHT needs to more actively engage with these agencies to identify prevention strategies, measure and monitor outcomes, and limit the flow of people into homelessness.

Sections 3 to 7 provide further details on our recommendations.

1.5 Response to our recommendations

We provided a detailed management letter to SAHT outlining our findings and recommendations and SAHT provided a response. SAHT also provided an overall response to this report as the responsible agency at the time of our audit, as follows:

> *The SA Housing Trust (the Trust) implemented a new strategic approach for the delivery of a range of specialist homelessness services on 1 July 2021, during the unprecedented COVID-19 pandemic period. This change moved away from individualised, singular point contracting to a strategic alliance model, representing a collaboration between multiple agencies towards a common goal. This is a significant change in the way services are provided to people experiencing, or at risk of experiencing, homelessness, and requires the Trust to work with the specialist homelessness services sector differently to promote collaboration across the sector, with a common goal of moving towards a service system that focuses on delivering outcomes, as opposed to single agencies working towards that goal.*
>
> *The new Alliance model is a generational change in the way in which homelessness services are delivered in South Australia. It was co-designed with the homelessness services sector through extensive consultation and reflects a shared acceptance that the traditional arms-length contracting over the previous decade failed to make any meaningful impact on improving outcomes for South Australians experiencing, or at risk of, homelessness.*
>
> *This change in model to strategic collaboration represents a significant step change for both the Trust and the homelessness services sector and involves shifting all aspects of how homelessness services are delivered in South Australia.*

[b] Section 2.1.2 discusses the key drivers of homelessness and how it is often the result of multiple system failure.

The model entrusts the expertise of its service partners who have the knowledge and expertise to best align the budget and service provision with the frontline service need. Working in partnership with the Alliances demonstrates how services can increase and expand as part of a responsive system.

While it is recognised that this transformational change caused significant initial disruption for both the Trust and the sector, with a need for ongoing process improvements, both the Trust and the sector are determined that we must take a long-term view to improving homelessness services. It is for this reason that the homelessness Alliances have terms of up to six years in contrast to the previous cycle of annual contracts that failed to deliver meaningful improvements for so many years.

This long-term approach is reflected in the identification that the Alliance model is still in its foundational phase and hence management arrangements in some areas are not yet fully mature. Many of the recommendations are consistent with work the Trust was progressing. As a result of Machinery of Government changes from 1 July 2024, the lead agency for homelessness services is now the Department of Human Services. The Trust will continue to support the model maturity in partnership with that agency. The Trust does caution that it is premature to form any concluded views on the overall effectiveness of homeless services at a systemic level and acknowledges that the review recognises this in its findings.

The Trust considers that the findings overlook the positive impact already being achieved, particularly the benefits of locating specialist expertise differently to the funder to agent models that governments used historically. The early benefits collectively identified include:

- ***A total allocation of $307m in 2021 for up to six years to five alliance organisations.*** *The shift away from narrow contract arrangements with 76 organisations reduced transactional costs and has given SAHT greater insight into the shared risks and opportunities and challenges.*
- ***A greater focus on outcomes and responsiveness.*** *Longer-term agreements and budget flexibility enables Alliances to respond to changing areas of need. Alliances are more flexible in their service model design and prioritisation of clients, which enabled more services to be provided in 2022/23 and 2023/24 within the contracting model.*
- ***More attention to partnerships and better collaboration with not-for-profit organisations.*** *Following the removal of competitive funding, the sector is more able to draw on their respective strengths and local relationships to deliver the best outcomes. Partners appreciate the Trust's willingness to work differently, which is helping to re-build trust.*

More broadly, the Trust recognises that the focus on establishing the Alliance model has necessarily reduced the attention paid to the management of legacy contracting arrangements for directly contracted homelessness services.

The opportunity to move away from these models remains a focus and as maturity of the Alliance model increases, and this opportunity may be better realised.

Likewise, the Trust acknowledges that it has not fully integrated certain operational contract management practices and is actively working to address these. Those improvements are in current workstreams in collaboration with sector providers and now with the Department of Human Services. This includes:

- ***Outcomes Framework.*** *Implementation of the outcome's framework is a four-year workplan to a level of maturity that would enable outcomes-based contracting. The Trust and sector co-created of this Framework and commenced implementation.*
- ***H2H System Review****. Data integrity and system integration are critical to effective system and performance management. The Trust and service partners completed this comprehensive review and progressed future options for progress.*
- ***Governance and Strategic Advisory.*** *All sector partners contributed to the co-design of updated governance structures that includes a sector advisory. Planning for development of the next strategy and commissioning for the next phase of the Alliance Model, and integration of Directly Contracted Services commenced.*
- ***Service Mapping Review.*** *A review of all Directly Contracted Services and planning for future alignment and service requirements over a two-year period is approved. This included opportunities for integration and alignment with the future strategy.*
- ***Practice Improvements.*** *The Contract Management team identified a workplan of improvements based on full staff resourcing to improve reporting practices, revision of the contract management plan, and regular review of all services.*

As the responsibility for homelessness now rests with another agency, the Trust also cautions that any implementation of recommendations that fundamentally impact the partnership model is moderated, to ensure they do not undermine the collaborative work that has occurred. The strategic reform aimed to drive long term systemic and statewide change, in the context of place, and since 2018 the specialist homelessness services have been building their service systems towards these long-term goals and sharing their resources and ideas across their Alliances. The Trust considers that this approach has better focused the services system on the long-term opportunity to improve outcomes for vulnerable South Australians.

Further to the SAHT response, Appendix 5 includes a response from the Department of Human Services, the agency responsible for this function from 1 July 2024.

2 Background

2.1 Defining homelessness and its causes

2.1.1 Definition of homelessness

There is no single definition of homelessness and there are a wide range of views as to what constitutes homelessness. However, it is generally accepted that homelessness is more than just 'rooflessness' or rough sleeping.[4]

2.1.1.1 Statistical definition of homelessness

The Australian Bureau of Statistics (ABS) use a statistical definition to estimate the prevalence of homelessness in Australia on census night. This is the main source of homelessness estimates in Australia.[5] Its statistical definition of homelessness is:

> *When a person does not have suitable accommodation alternatives, they are considered homeless if their current living arrangement:*
>
> - *is in a dwelling that is inadequate*
> - *has no tenure, or if their initial tenure is short and not extendable, or*
> - *does not allow them to have control of, and access to space for social relations.*[6]

The ABS has also developed homelessness operational groups to describe broad categories of living situations considered to be homeless. The operational groups are people:

- living in improvised dwellings, tents or sleeping out
- in supported accommodation for the homeless
- staying temporarily with other households
- living in boarding houses
- in other temporary lodgings
- living in severely crowded dwellings.

2.1.1.2 Australian Institute of Health and Welfare (AIHW) definition of homelessness

The AIHW has developed a definition of homelessness for the purposes of the Specialist Homelessness Services Collection.[c] It considers a person to be experiencing homelessness if they are living in either:

- non-conventional accommodation or sleeping rough
- short-term or emergency accommodation.[7]

Non-conventional accommodation or sleeping rough includes living on the streets, sleeping in parks, squatting, staying in cars or railway carriages, living in improvised dwellings and living in the long grass.

Short-term or emergency accommodation includes living in refuges or crisis shelters, couch surfing with no tenure, living temporarily with friends and relatives, living in insecure accommodation on a short-term basis and living in emergency accommodation arranged by a specialist homelessness services provider.

[c] The Specialist Homelessness Services Collection is the data collected from specialist homelessness services agencies across Australia that are funded under the National Housing and Homelessness Agreement.

A key difference between the AIHW and ABS definitions is that the AIHW does not include people living in severely crowded dwellings.[8]

SAHT uses the AIHW definition when reporting on its specialist homelessness services. Neither SAHT or the AIHW report on the number of people experiencing homelessness. They only report on the number of people assisted by specialist homelessness services providers and whether they were experiencing or at risk of homelessness.

2.1.2 Causes of homelessness

Homelessness has many drivers and causes and can affect anyone. Some of the factors are shown in figure 2.1.

Figure 2.1: Factors that increase the risk of a person experiencing homelessness

Individual risk factors

Family and relationship breakdown

Domestic violence

Unemployment

Mental health issues

Substance abuse

Recent incarceration

Previous episode of homelessness

Structural risk factors

Lack of affordable housing

Weak labour market

Unavailable or inaccessible homelessness services

Poverty

System failures

Poor discharge planning from institutions such as:

- hospitals
- psychiatric hospital or unit
- disability support care
- state care
- correctional facilities.

Lack of early intervention in specific care systems (for example, mental illness and substance abuse).

Sources: Australian Housing and Urban Research Institute, Canadian Observatory on Homelessness and Sacred Heart Mission.[9]

Natural disasters and unprecedented events such as the COVID-19 pandemic can also contribute to homelessness.[10]

The causes of homelessness are multifaceted and complex. One Canadian research institute noted:

> *The causes of homelessness reflect an intricate interplay between structural factors, systems failures*[d] *and individual circumstances. Homelessness is usually the result of the cumulative impact of a number of factors, rather than a single cause.*[11]

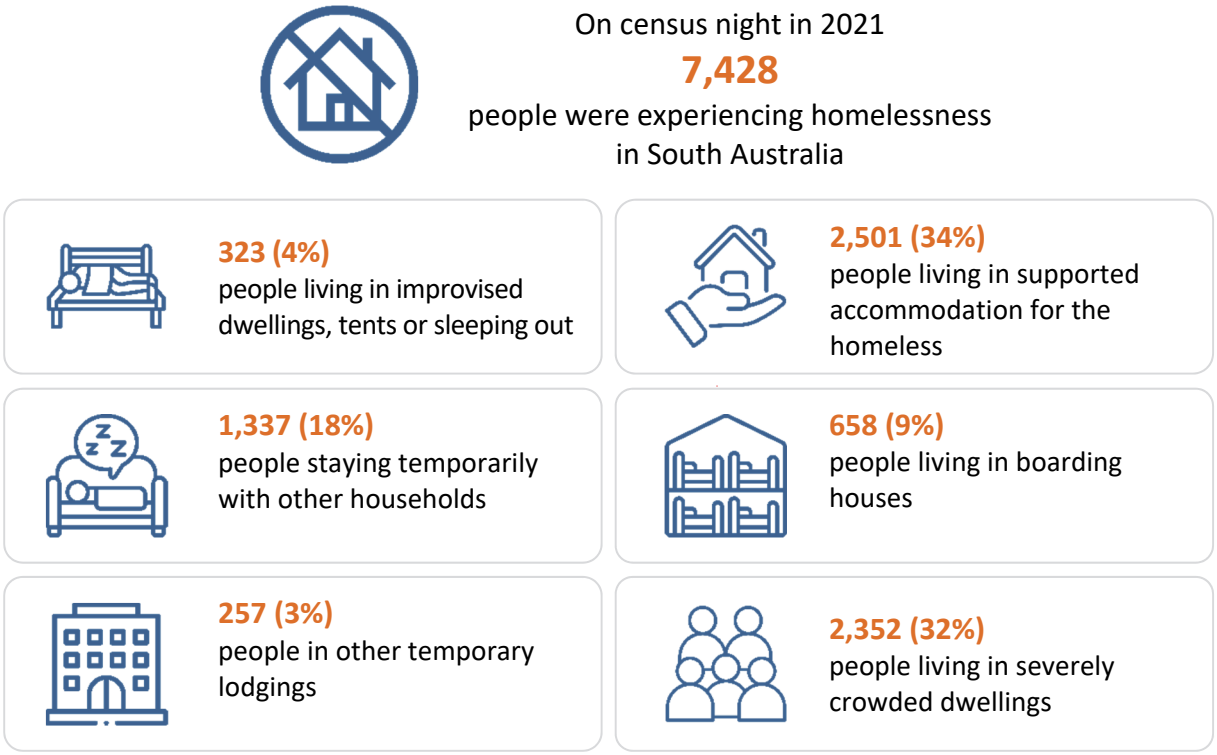
Several SA Government agencies provide support services that may help to prevent and reduce homelessness by addressing individual risk factors. They include mental health, drug and alcohol, domestic and family violence and correctional services.

[d] System failures are failures in support and service systems to effectively prevent someone from experiencing homelessness.

2.1.3 Prevalence of homelessness in South Australia

The most recent census (August 2021) reported an estimated 7,428 people experiencing homelessness in South Australia and estimated the homeless rate in South Australia as 41.7 people per 10,000.[12]

Figure 2.2: ABS estimate of people experiencing homelessness by operational group on the 2021 census night



Source: Australian Bureau of Statistics, *Estimating homelessness 2021 census*.

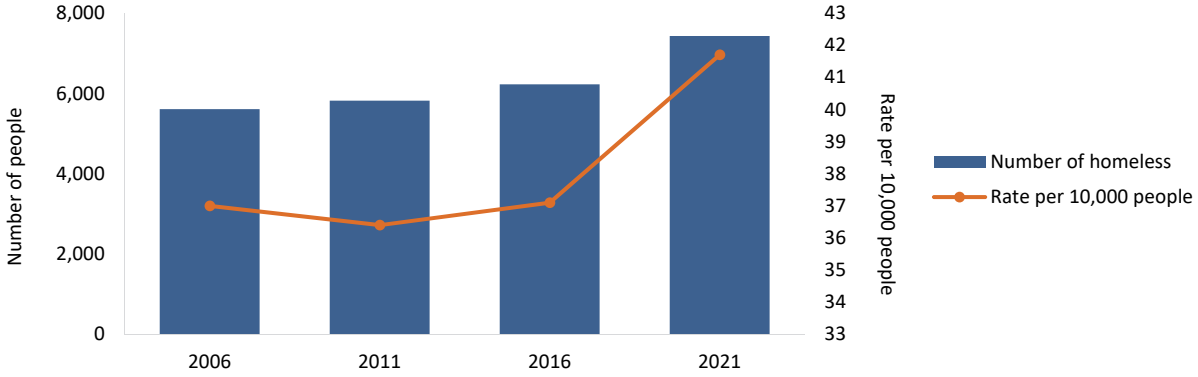
In addition, an estimated 5,158 people were marginally housed[e] in South Australia on the 2021 census night.

While people sleeping rough (that is, living in improvised dwellings, tents or sleeping out) is the most visible form of homelessness, it accounted for only 4% of the estimated number of people experiencing homelessness.

Since 2006, there has been a 32% increase in the number of people experiencing homelessness in South Australia and the estimated rate of homelessness has increased from 37 people to 41.7 people per 10,000. Figure 2.3 shows the trend since 2006.

[e] People marginally housed are people not classified as homeless on census night but living in some form of marginal housing and possibly at risk of homelessness, and people whose living arrangements are close to the statistical boundary of homelessness.

Figure 2.3: ABS estimate of homelessness in South Australia from 2006 to 2021



Source: Australian Bureau of Statistics, *Estimating homelessness 2021 census*.

2.2 Consequences and impact of homelessness

People experiencing homelessness are among the most vulnerable in our community. Homelessness can compromise people's health, safety, and ability to engage in social and economic activity. Figure 2.4 outlines some of the consequences and impacts.

Figure 2.4: Consequences and impacts of homelessness

Health

Homeless people experience:

- diseases, chronic conditions and other health conditions at a higher rate than the general population[13]
- challenges in accessing appropriate and effective medical care[14]
- reduced life expectancy compared to those who do not experience homelessness.[15]

Homelessness can have an acute and lasting impact on a person's mental health.[16]

Economic

Homeless people experience barriers to finding and engaging in employment (for example, difficulty maintaining hygiene, discrimination in the labour market, inability to afford transport).[17]

Homelessness is associated with high unemployment and relatively low labour participation rates, and therefore lower incomes.[18]

Safety

Homeless people, particularly rough sleepers, are vulnerable to becoming victims of violence and crime.[19]

People may stay in unsafe environments (for example, with a violent partner) to avoid homelessness.[20]

Social

Homelessness is associated with poor justice outcomes (for example, rough sleepers are more likely to receive certain fines and charges relating to public order offences).[21]

People experiencing homelessness often face social stigma, isolation and mistrust, which can exacerbate their exclusion from society.[22]

There are also significant costs to the community from homelessness, including:

- the costs of providing specialist homelessness services
- costs that homelessness imposes on other government services such as health, justice, education and income support services.[23]

The following case study shows the impact of homelessness.

Case study 1 – Bart

While Bart was living in private rental accommodation, he jointly invested in a business venture with another person, who he trusted. However, this person misappropriated the business funds, ultimately leaving Bart with no money and no income.

He was unable to afford to pay his rent, could not maintain his tenancy, and so started living in his car.

Bart lived in his car for four years, despite regularly seeking help from his local homelessness access point. The only assistance that the access point service could provide was to fund one or two nights' respite in a motel. After that, Bart would have no other option but to return to his car.

Bart got to the point where he no longer felt able to cope and was considering suicide. He felt enormous shame about his situation, about the indignity of having no home, of having nowhere to toilet or shower, the extreme difficulty of managing his health without cooking facilities or adequate space to rest, and the inability to source employment while in such a setting.

Eventually a transitional housing property became available, which included the provision of case management support. Bart has now lived in his transitional housing apartment for three years, and, because of this period of stable housing and support, he is recovering from the trauma of homelessness, and has been able to face his surrounding issues.

Positive outcomes

With support, Bart:

- has stabilised his finances
- is addressing a number of physical health needs with a local GP
- regularly attends local drop-in centres, where he is able to share time and experiences with others
- has been able to overcome the shame he was feeling so has been able to re-establish relationships with his family
- is accessing psychological treatment to address issues stemming from his childhood.

Source: Western Homelessness Network.[24]

2.3 National Housing and Homelessness Agreement

The National Housing and Homelessness Agreement (NHHA) was an intergovernmental agreement on housing and homelessness between the Commonwealth, State and Territory Governments. It provided for the transfer of about $1.6 billion each year to the states and territories to fund homelessness and housing services and programs.

The NHHA came into effect in July 2018, replacing the National Affordable Housing Agreement and the associated National Partnership Agreement on Homelessness. The bilateral agreements under the NHHA expired on 30 June 2023, and the parties agreed to a one-year extension of them to 30 June 2024.

The NHHA aimed to contribute to an effective specialist homelessness services system that responds to and supports people who are homeless or at risk of homelessness to achieve and maintain housing and address the incidence and prevalence of homelessness.[25]

The National Agreement on Social Housing and Homelessness replaced the NHHA from 1 July 2024.

2.4 Specialist homelessness services

2.4.1 SAHT's responsibility for specialist homelessness services

Under the NHHA the SA Government is responsible for administering and delivering specialist homelessness services in South Australia.[26]

SAHT has been the SA Government agency responsible for funding and governance of the homelessness services sector in South Australia. This responsibility transferred to the Department of Human Services on 1 July 2024.

2.4.2 Overview of specialist homelessness services

Specialist homelessness services are defined as:

> *Assistance provided by a specialist homelessness agency to a client aimed at responding to or preventing homelessness.*[27]

Specialist homelessness services providers deliver a range of specialist services to support people experiencing or at risk of homelessness.

Figure 2.5: Services provided by specialist homelessness services providers

The services provided, and who support is provided to, varies between specialist homelessness services providers. Some provide accommodation services and a general suite of other support services, while others provide more targeted services. Some providers may specialise in providing support to specific groups such as young people or women.

Specialist homelessness services providers have limited housing and accommodation they can provide directly to clients. They deliver case management services to help those experiencing or at risk of homelessness find long-term housing and address issues contributing to their housing insecurity. They also have an important role in referring clients to other support services.[28]

FACT

SAHT operates an Emergency Accommodation Program that provides emergency accommodation (usually in a hotel or motel) for people experiencing housing crisis and risk. This program sits outside of the specialist homelessness services system. Specialist homelessness services providers refer clients to the program to meet emergency accommodation needs while continuing to provide support, including help to find alternative accommodation.

2.4.3 Funding of specialist homelessness services

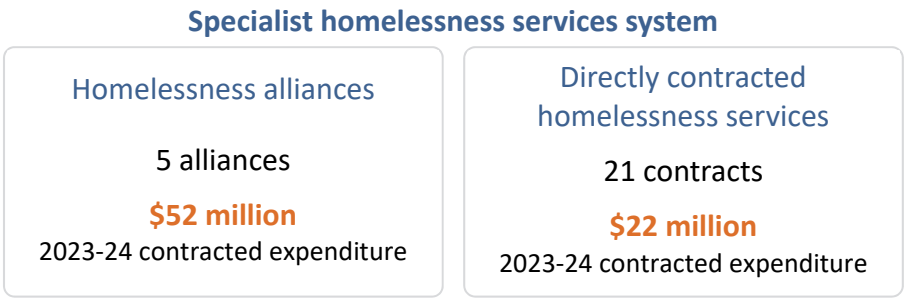
The NHHA included specific funding from the Commonwealth Government to the states and territories for homelessness. The states and territories must then match this funding.

South Australia received $9.9 million from the Commonwealth Government for homelessness in 2023-24. SAHT used this money to fund the provision of specialist homelessness services by non-government organisations. Its contracted expenditure for these services was $74 million in 2023-24.

2.4.4 Specialist homelessness services delivery models in South Australia

SAHT uses two models to contract specialist homelessness services: an alliance model and a directly contracted services model. Figure 2.6 shows the contracts and the 2023-24 contracted expenditure for each model.

Figure 2.6: Specialist homelessness services delivery models



Note: The 'Provision of the Housing for Health for clients of the COVID emergency accommodation program who did not achieve a housing outcome' contract with Uniting Communities ceased in September 2023. At 30 June 2024 the SAHT had 20 directly contracted homelessness services.

Before 1 July 2021, SAHT had 76 discrete contracts with 36 providers to deliver specialist homelessness services using a direct contracting model with individual providers.

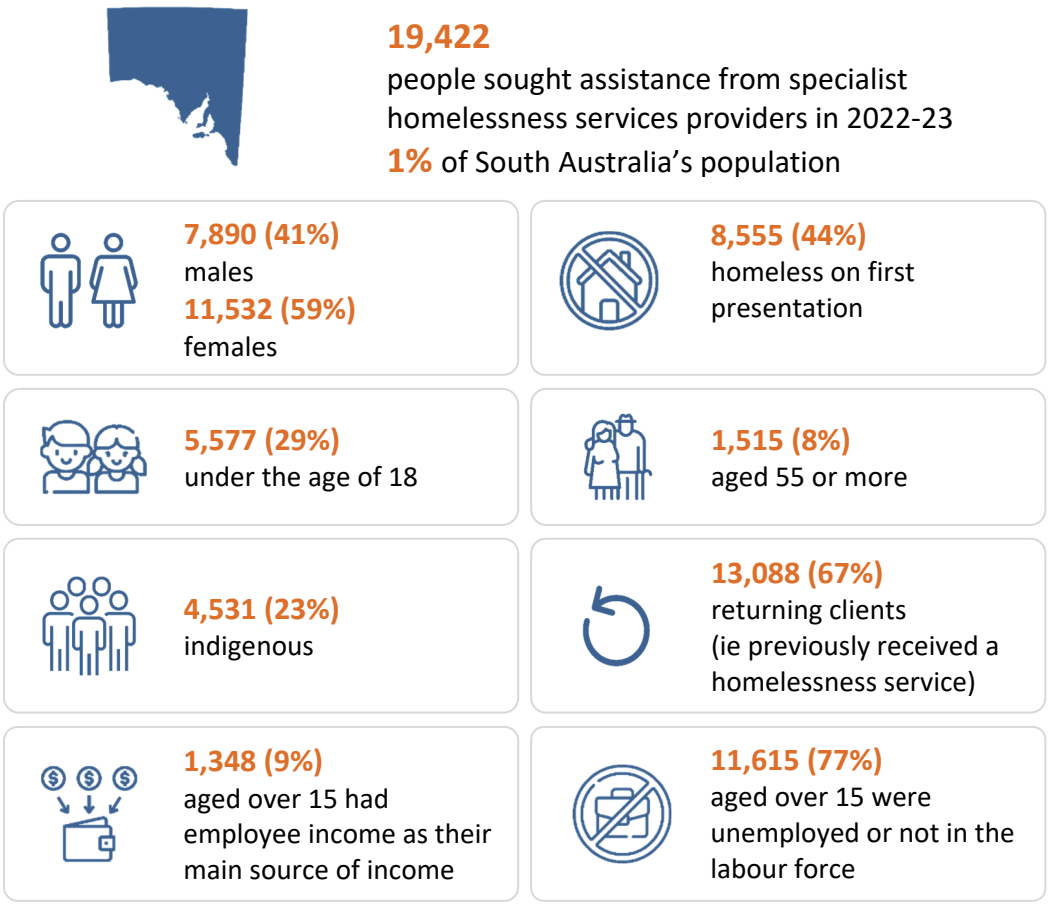
On 1 July 2021 SAHT implemented the alliance service model, amalgamating funding from 49 service agreement contracts into five alliance-based contracts. Appendix 2 provides further details on the alliance service model and SAHT's directly contracted homelessness services.

2.4.5 Specialist homelessness services clients

2.4.5.1 Characteristics of people who seek assistance from specialist homelessness services

Figure 2.7 shows some of the key characteristics of people who sought specialist homelessness services in 2022-23.

Figure 2.7: Specialist homelessness services clients in 2022-23



Source: AIHW.[29]

Note: The number of clients homeless on first presentation is based on a different definition of homeless than the definition used by the ABS described in section 2.1.1.1.

2.4.5.2 Reasons people seek help from specialist homelessness services

The main reasons people told service providers they were seeking specialist homelessness services in 2022-23 are shown in figure 2.8.

Figure 2.8: Main reasons for seeking specialist homelessness services in 2022-23

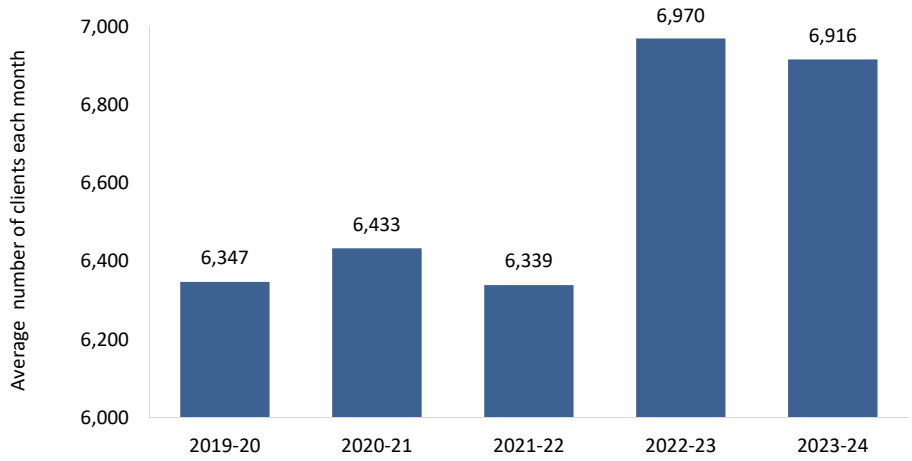
Source: AIHW.[30]

The accommodation issues people sought help for included housing crisis[f] (8,851 people) and inadequate or inappropriate dwelling conditions (2,459 people). 3,772 people identified domestic and family violence as their main reason for seeking help, with 81% of them female.

2.4.6 Demand for specialist homelessness services

The demand for specialist homelessness services in South Australia has increased in recent years.

Figure 2.9: Average monthly specialist homelessness services clients from 2019-20 to 2023-24



Source: AIHW.[31]

Notes:

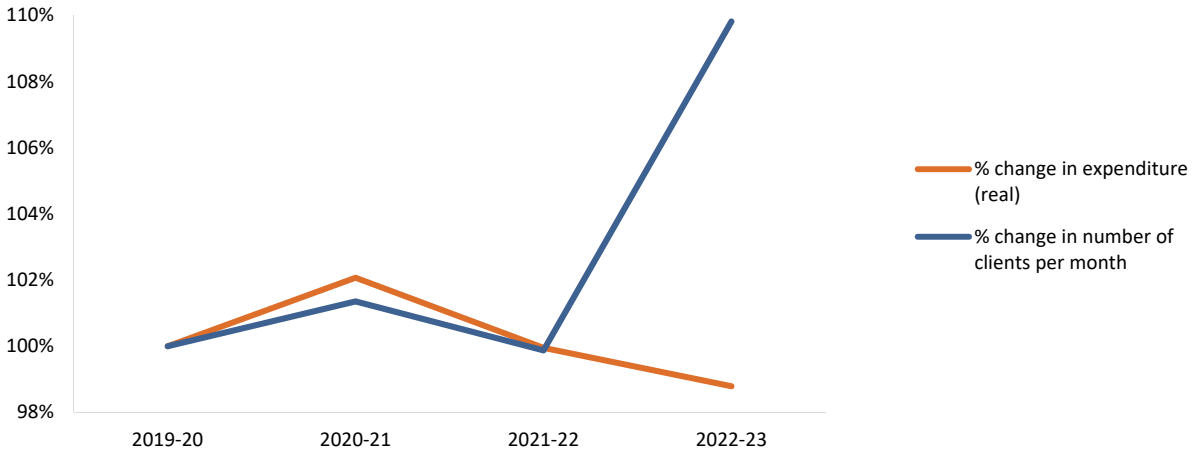
- 2023-24 shows the average number of clients each month to March 2024.
- Monthly average should not be multiplied by 12 to give a yearly total as a single client may receive assistance in more than one month.

Figure 2.9 shows the average number of monthly specialist homelessness services clients for South Australia increasing by 9% from 2019-20 to 2023-24. But while the number of people seeking support increased, SAHT expenditure on payments to service providers decreased by 1.2% in real terms[g] from 2019-20 to 2022-23, as figure 2.10 shows.

[f] Housing crisis as a reason for seeking assistance from specialist homelessness services refers to clients being formally evicted or asked to leave their previous accommodation.

[g] 'In real terms' means the change in expenditure after adjusting for the effect of inflation.

Figure 2.10: Change in the demand for specialist homelessness services and SAHT expenditure (real) on payments to service providers: 2019-20 to 2022-23



Source: Specialist homelessness services expenditure was sourced from SAHT audited financial statements.

Note: Specialist homelessness service expenditure data has been adjusted to 2022-23 dollars using the ABS table 36, Expenditure on Gross Domestic Product (GDP), Chain volume measures and current prices, Annual (Series ID: A2304687R).

2.4.6.1 Housing affordability and availability in South Australia increasing the demand for specialist homelessness services

The supply of safe and affordable housing is a structural risk factor impacting homelessness. The Australian Productivity Commission noted:

> *A lack of affordable housing restricts people's housing options, prevents people from exiting homelessness, and raises a person's risk of becoming homeless from other causes of homelessness.*[32]

Social housing availability

Social housing is a key source of affordable and secure housing that can benefit people who are homeless or at risk of homelessness.[33]

FACT

Social housing is subsidised rental housing provided by non-government organisations or government organisations to help people who are unable to access suitable accommodation in the private rental market. It comprises public housing, which is delivered by SAHT in South Australia, and community housing, which is delivered by non-government organisations.

At 24 May 2024, there were 16,446 applicants on the South Australian social housing register. This included 4,190 category 1 applicants.[h] The average waiting time in category 1 before being housed is seven months.

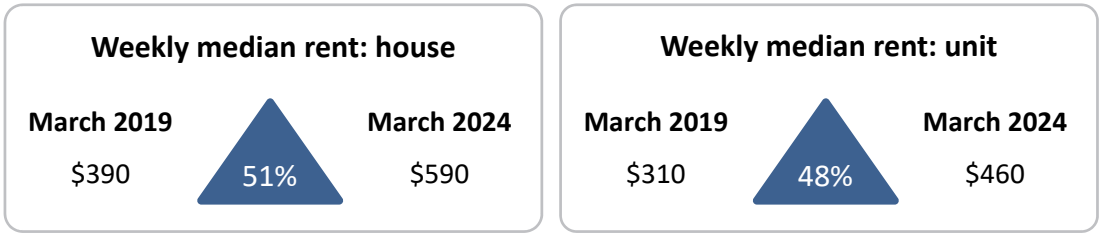
[h] Category 1 applicants are people with urgent housing needs and long-term barriers to accessing or maintaining private housing options.

Private rental affordability and availability

Low private rental vacancy rates and high asking rents make it difficult for low-income earners to access housing in the private rental market.

In February 2024 the private rental vacancy rate for Adelaide was 0.3%.[34] Such low vacancy rates have led to increased rental prices. Figure 2.11 shows the increase in weekly median rents for houses and units in Adelaide between March 2019 and March 2024.

Figure 2.11: Change in weekly median rents in Adelaide from March 2019 to March 2024



Source: Domain Research.[35]

The weekly median rents in 2024 mean that a single person household on median weekly earnings[i] renting in the private rental market would be in housing stress.

The 2024 Anglicare Australia *Rental Affordability Snapshot: South Australia*[j] found:

- 17 properties available for rent (1%) that were suitable and affordable for households on income support payments
- no properties that were suitable and affordable for a single person on job seeker or youth allowance payments.[36]

FACT

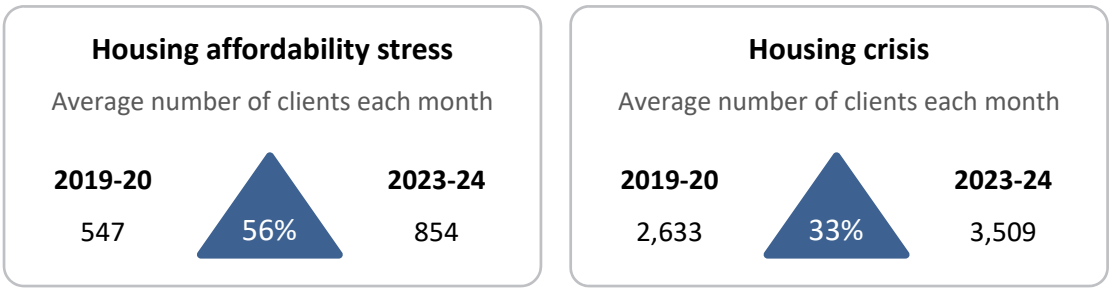
Housing stress is commonly defined as lower income households that spend more than 30% of their gross income on housing costs. Housing stress is a risk factor for homelessness.

The lack of affordable and available housing has increased the demand for specialist homelessness services. Figure 2.12 shows the increase in the number of people in South Australia seeking assistance because of housing affordability stress and housing crisis (eg eviction) over the past five years.

[i] The most recent ABS release of median weekly earnings (August 2023) found the median weekly earnings in Greater Adelaide was $1,200.

[j] Anglicare Australia's rental affordability snapshot looked at the private rentals advertised over the weekend of Saturday 16 March 2024 to test if it is possible for people on low incomes to rent a home in the private rental market. There were 1,615 properties advertised for rent in South Australia that weekend.

Figure 2.12: People seeking specialist homelessness services due to housing affordability stress and housing crisis from 2019-20 to 2023-24



Source: AIHW.[37]

Notes:

- 2023-24 shows the average number of clients each month to March 2024.
- Monthly average should not be multiplied by 12 to give a yearly total as a single client may receive assistance in more than one month.

The following case study shows how the lack of affordable housing can lead to homelessness.

Case study 2 – John

John (75) enjoyed a relatively comfortable and stable life, until soaring interest rates rattled his world.

'The lady who owned the house, just couldn't keep up the payments anymore', says John.

His landlord's inability to keep up with rising payments pushed John to the brink of homelessness. He was given six weeks to find a new home.

The competitive rental market did not look kindly on John's application that listed 'pension' as his main source of income.

'I couldn't afford to rent anywhere. I was getting desperate. There was nothing out there...'.

Facing a bleak and uncertain future, John found himself contemplating the unthinkable – living in his car.

For four months, John was homeless, living in his car. It was unseen but it was a real battle of homelessness for the 75-year-old.

Source: Mission Australia.[38]

2.4.7 Unmet need for specialist homelessness services

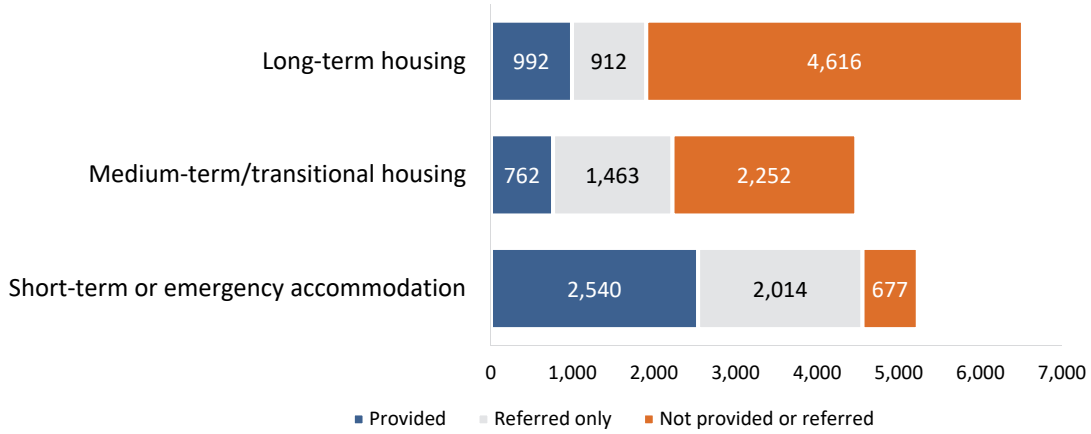
The AIHW collects information on whether people who sought assistance from specialist homelessness services providers had their needs met. Some of these people do not receive all the services they require, and this is referred to as unmet need.

2.4.7.1 Unmet need for accommodation assistance

AIHW data indicates that the majority (74%) of people seeking specialist homelessness services in South Australia in 2022-23 sought accommodation assistance.[39]

Figure 2.13 shows a significant amount of unmet need for accommodation assistance in South Australia, particularly long-term housing. 71% of clients who identified a need for long-term housing were not provided or referred to long-term housing.

Figure 2.13: Unmet need for accommodation assistance in 2022-23[k]



Source: AIHW.[40]

Note: A client may request multiple service and assistance types.

The AIHW has noted the difficulties specialist homelessness services providers have in assisting clients to find suitable long-term housing:

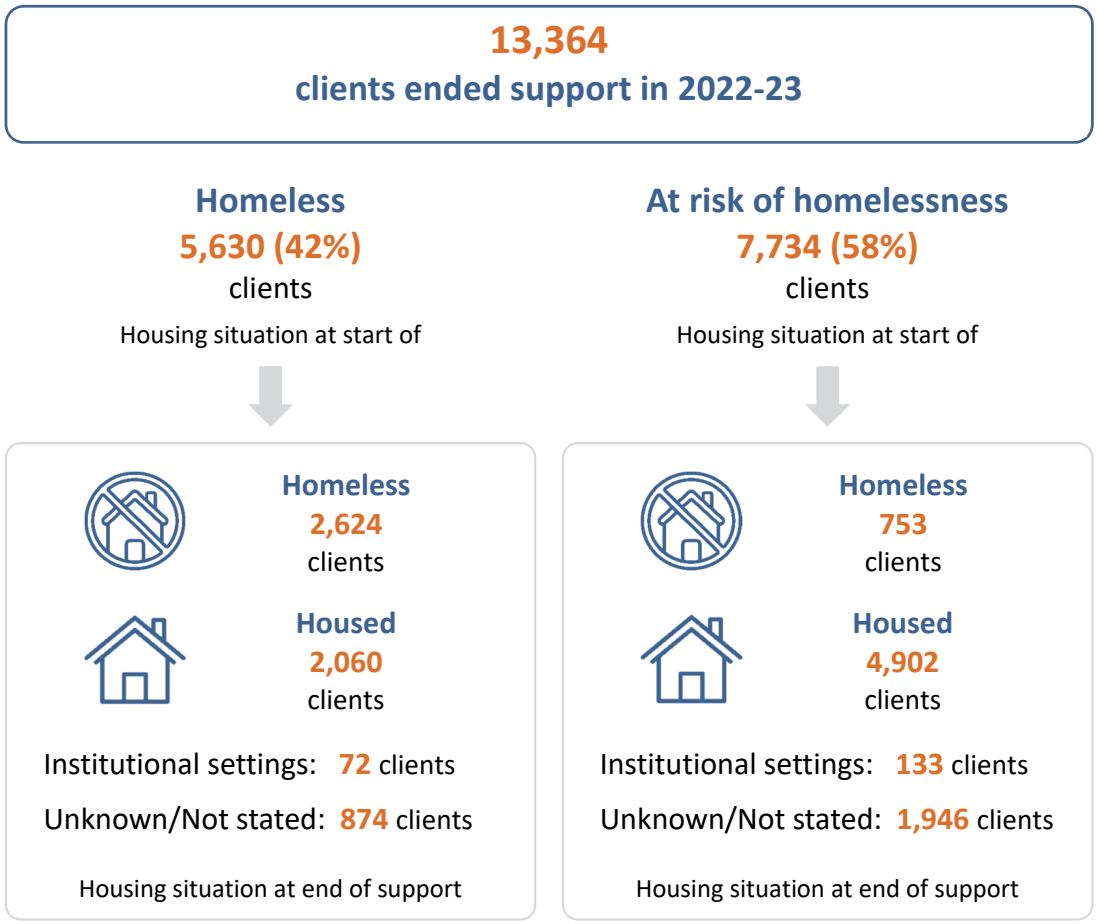
> *This highlights the complexity of specialist homelessness services agencies assisting clients to find suitable long-term housing, and should not be considered a 'low success rate'. In some instances, this may be because the agency's service offering may not include long-term housing options and may also be an indicator of the lack of affordable housing available in the area.*[41]

2.4.8 Specialist homelessness service housing outcomes

The AIHW collects information on the housing outcomes of people before and after they receive support from specialist homelessness services providers. Figure 2.14 shows the change in housing situation between the start and end of support for the 13,364 specialist homelessness services clients in South Australia who ended their support in 2022-23.

[k] Figure 2.13 is based on data SAHT submitted to AIHW. We found that this data understates the extent of actual need for specialist homelessness services across the community (see section 3.2.2).

Figure 2.14: Housing outcome – clients who ended support in 2022-23



Source: AIHW.[42]

Notes:

- At risk of homelessness includes people whose housing situation at the start of their support was unknown/not stated (1,775 clients).
- A client's homeless and at risk of homelessness status is based on the Specialist Homelessness Services Collection definitions of homeless and at risk of homelessness.
- Institutional settings refer to people residing in a hospital, psychiatric hospital/unit, disability support, rehabilitation, boarding school/residential college, adult and youth correctional facility, aged care facility or immigration detention centre.

In 2022-23, 47% of homeless clients and 10% of clients at risk of homelessness at the start of their support were homeless following their support period.

FACT

A support period is the time a client receives services from a specialist homelessness services provider. It starts on the day they become a client by receiving a direct service from the service provider and ends on the last day services are provided. A support period ends when:

- the relationship between the client and service provider ends
- the client has reached the maximum amount of support the service provider can offer
- the client has not received any services for a whole calendar month and there is no ongoing relationship.

2.5 Timeline of key events and our audit

Figure 2.15 shows a timeline of key events for SAHT's management of specialist homelessness services and how they relate to the period of our performance audit.

Figure 2.15: Timeline of key events and our audit

December 2019	The SA Government releases the Our Housing Future 2020–2030 strategy.
September 2020	SAHT releases the Future Directions for Homelessness strategy.
July 2021	SAHT implements the homelessness alliance model.
November 2021	Flinders University Centre for Social Impact engaged to develop and provide research and evaluation capacity.
July 2022	A planning workshop was held to reset the purpose and course of the Alliance System Steering Group (ASSG). At the workshop it was agreed that the ASSG was not appropriately constituted to meet the sector's needs. ASSG meetings were cancelled pending the development of a new model for the ASSG.
May 2023	We meet with the Chief Executive, SAHT to discuss our planned audit of SAHT's management of specialist homelessness services.
June 2023	SAHT initiates the Homelessness System Review Project.
August 2023	The SAHT Board approves the progressive implementation of the SA Homelessness Outcomes Framework.
September 2023	We issue a letter to SAHT outlining our performance audit objective and criteria.
November 2023	SAHT management provides first report to the SAHT Board on specialist homelessness services performance.
February 2024	Homelessness System Review Project summary report finalised.
March 2024	First meeting of the new sector group established to replace the ASSG.
April 2024	First progress report to the SAHT Board on the status of the implementation of the SA Homelessness Outcomes Framework.
July 2024	Responsibility for specialist homelessness services is transferred from SAHT to the Department of Human Services. Auditor-General's report to Parliament on SAHT's management of specialist homelessness services completed.

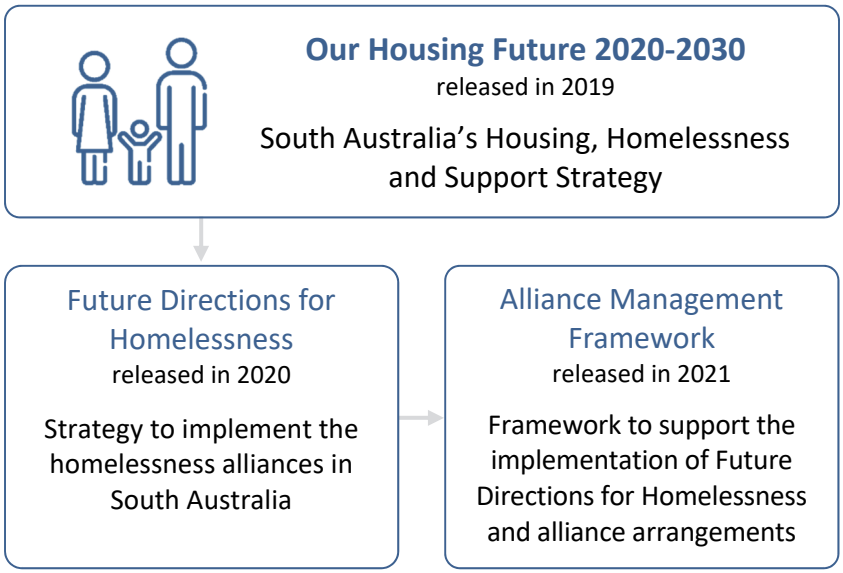
Period we conducted our performance audit.

3 Strategic planning and needs assessment

3.1 Overview of the strategic framework for specialist homelessness services

The strategic framework for specialist homelessness services put in place by the SA Government and SAHT is shown in figure 3.1.

Figure 3.1: Specialist homelessness services strategic framework



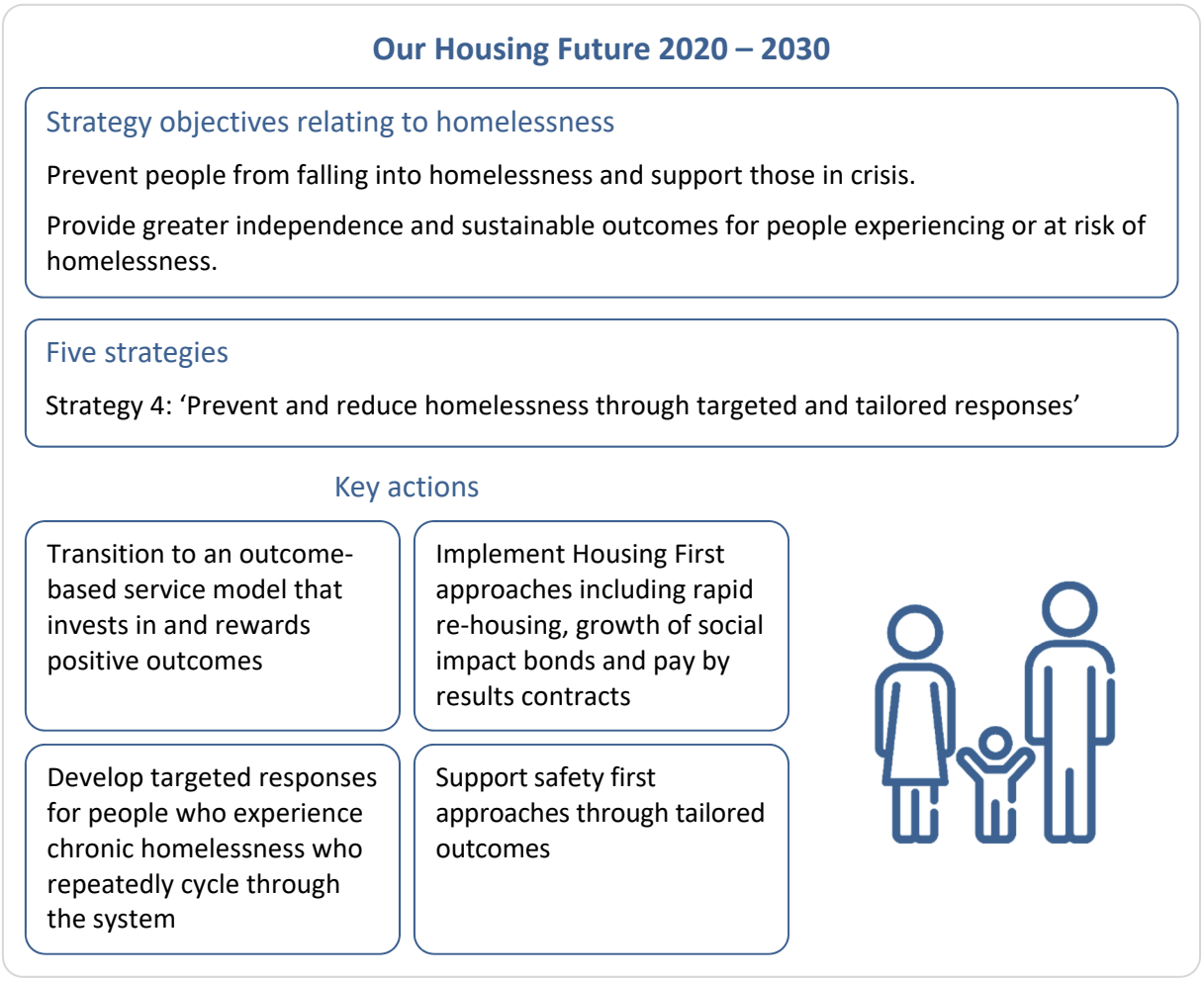
3.1.1 Our Housing Future 2020–2030

The SA Government released its housing, homelessness and support strategy, Our Housing Future 2020–2030, in December 2019.[I] It contains five strategies, with one focused on homelessness.

Figure 3.2 summarises the objectives, strategies and key actions in Our Housing Future 2020–2030 that focus on homelessness.

[I] The A Better Housing Future strategy was released by the SA Government in February 2023. It aims to deliver more social and affordable houses, greater protections for renters, more affordable rental opportunities and more support for people to buy a home. It does not include any specific objectives, initiatives or strategies directly related to the specialist homelessness services SAHT manages.

Figure 3.2: Our Housing Future 2020–2030 key elements for homelessness



3.1.2 Future Directions for Homelessness

The Future Directions for Homelessness strategy sets out:

- the rationale for why the change to the alliance model was made
- high-level objectives and approach for the alliance arrangements, including an overall objective of reducing the risk of homelessness and time people spend in the homelessness system
- intended client and system outcomes of the alliance arrangements
- alliance funding arrangements and duration
- scope of alliance services to be delivered.

The intended client and system outcomes in the Future Directions for Homelessness will be replaced by the new SA Homelessness Outcomes Framework (Outcomes Framework), which is still being finalised and implemented. Section 5.1. provides further details on the Outcomes Framework.

3.1.3 Alliance Management Framework

SAHT established the Alliance Management Framework in 2021. It aims to support the operation of alliance governance structures and sets out the:

- roles, responsibilities and membership of alliance governing bodies
- key stakeholder relationships
- service network and service types
- alliance structure and service delivery planning requirements
- reporting and performance measurement approach.

3.2 Findings and recommendations

3.2.1 Strategic planning does not reflect a whole-of-system approach or current operating environment

Recommendation

SAHT should update its strategic plan for specialist homelessness services to ensure it:

- clearly reflects its current strategic approach for the whole specialist homelessness services system, capturing both alliance and directly contracted homelessness services
- outlines how it plans to address the current challenging operating environment for specialist homelessness services, including how it intends to meet service demand
- clearly identifies measures of success.

SAHT should ensure ongoing reporting is provided to its Board and Executive on the implementation of the updated strategy, including progress against the measures of success.

SAHT should also review and update the Alliance Management Framework to reflect current alliance management and governance arrangements. This includes considering whether a single management framework covering both alliance and directly contracted homelessness services should be established or whether separate management frameworks for the different service delivery models are more appropriate.

Finding

We found the Future Directions for Homelessness strategy, supported by the Alliance Management Framework, provided a good base for the initial implementation of the alliance services model.

However, there have been several significant changes in the operating environment for specialist homelessness services since this strategy and framework were developed. These include major changes in the State's housing market, increasing demand for specialist homelessness services, the development of a new Outcomes Framework for the whole sector and changes in alliance governance arrangements.

We also found the strategy did not provide measures of success for intended outcomes. The principles in Premier and Cabinet Circular PC044 *South Australian Funding Policy for the not-for-profit sector* state that measures of success for a funding activity should be defined as part of planning. They reflect the targets that need to be achieved for the system to be considered successful. An example measure could be a targeted reduction in the number of people experiencing homelessness in the State over a specified period.

In addition, the strategic objectives, governance and management arrangements for directly contracted homelessness services are currently unclear, as they are not captured in the Future Directions for Homelessness strategy or Alliance Management Framework. Directly contracted homelessness services are an important part of the whole specialist homelessness services system, constituting 30% of total expenditure.

Without a clear system-wide strategic, governance and management framework that addresses the current challenging environment for specialist homelessness services, there is an increased risk that SAHT will not:

- effectively respond to current housing market pressures and increased demand for specialist homelessness services
- achieve the targeted system-wide outcomes in its Outcomes Framework.

SAHT advised us that it plans to update its strategy to reflect a whole-of-system approach and the current operating environment for specialist homelessness services.

3.2.2 SAHT has not identified the level of unmet need

Recommendation

SAHT should:

- regularly monitor service providers to ensure unassisted requests for service and unmet need are consistently and completely recorded in its client management system
- complete a study into the unmet need for homelessness support services and a stocktake of its current services to determine the funding required to adequately meet the needs of people experiencing or at risk of homelessness
- assign clear responsibility for regular ongoing monitoring of unassisted requests for service, unmet need and service gaps across the system, and develop responses to trends, issues and risks identified.

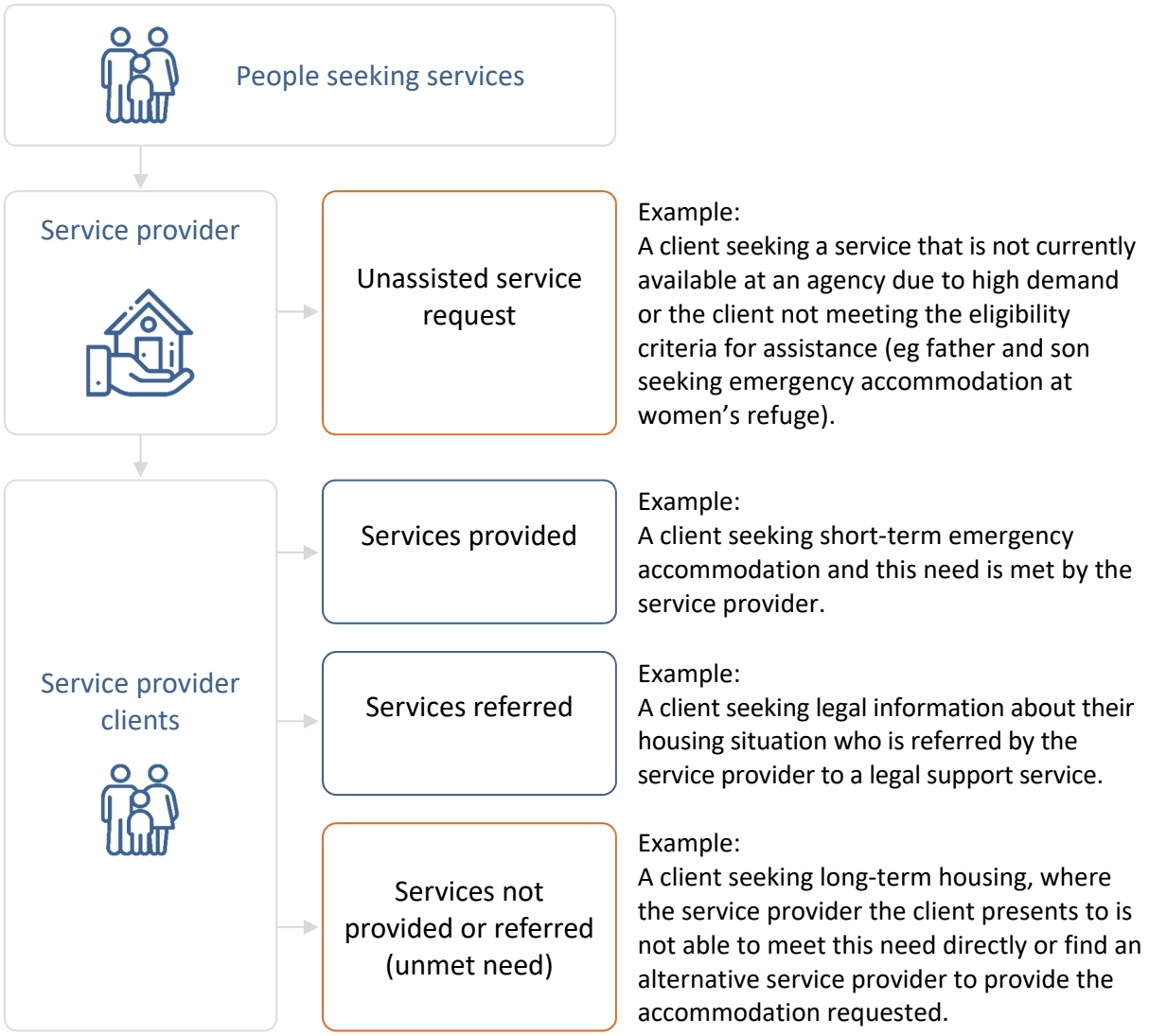
SAHT should consider exploring options to better understand the ‘true’ or actual need for specialist homelessness services across the State and how it can improve the awareness and reach of its services.

Finding

Specialist homelessness services data under-reports unmet need

Some people who approach specialist homelessness services providers may not be offered any assistance (unassisted request for services) or may not receive all services they require (unmet need).

Figure 3.3: Access to and delivery of specialist homelessness services



SAHT staff and service providers told us that unassisted requests for service and unmet need have not been consistently and completely recorded in the client management system. As a result, specialist homelessness services data currently under-reports the level of unmet need across the system.

SAHT has not analysed unmet need and service gaps

The Australian Government Productivity Commission issued a report on the NHHA in August 2022 recommending that:

> *State and Territory Governments should commit to a study into the unmet need for homelessness support and a stocktake of current services, to determine the level of funding required to adequately meet the needs of people experiencing or at risk of homelessness.*[43]

We found that SAHT has not:

- performed a stocktake of its current services and analysed unmet need to identify service gaps and determine the level of funding required
- clearly defined responsibilities for monitoring and responding to unmet need and service gaps.

SAHT does not have a complete and accurate understanding of the 'true' need for specialist homelessness services across the State

SAHT staff and service providers told us that many people who could benefit from using specialist homelessness services do not access them. For example, many young people appear to be regularly couch surfing but not seeking help from the services. This means specialist homelessness services data does not capture the 'true' or actual level of service need across the community.[m] It also highlights that people may not be aware of the benefits that specialist homelessness services can offer and SAHT could improve the reach of its services.

Information gaps increase the risk that people experiencing or at risk of homelessness will not receive the support they need

Given the information gaps we identified above, SAHT does not have the complete and accurate picture of system-wide need for specialist homelessness services required to inform effective strategic planning. SAHT lacks information to:

- confirm that its investments in services are directed where they are most needed
- confirm any service gaps or funding shortfalls
- promptly identify and respond to emerging trends in service need arising from changes in the housing market, including ensuring there is enough system capacity.

This increases the risk that people experiencing or at risk of homelessness may not receive the support they need. Given the current challenges in finding affordable housing, more people may experience housing insecurity for longer, including rough sleeping, couch surfing, sleeping in cars and tents or residing in temporary accommodation.

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[m] The ABS's 2014 General Social Survey indicates that of those who experienced homelessness in the last 10 years, 67% did not seek help during their most recent experience of homelessness. This suggests there may be a large number of people experiencing homelessness who are not presenting to specialist homelessness services providers for assistance.

3.2.3 SAHT has limited understanding of how clients move between the public housing and specialist homelessness services systems

Recommendation

SAHT should work with its specialist data consultant to better understand client flows between the public housing and specialist homelessness services systems and the relative change in these flows over time. This includes understanding the number of people on waiting lists for public housing that are currently experiencing or at risk of homelessness.

SAHT should develop and implement its planned public housing allocation decision-making framework based on this data analysis.

Finding

There is a strong interface between people accessing public housing services and the specialist homelessness services system. The two systems have come under increasing pressure in the current housing market given limited housing availability across the State.

We found that SAHT had not performed any specific analysis to understand:

- how the current demand for specialist homelessness services is impacted by changes in public housing availability
- the relationship between people known currently to be experiencing or at risk of homelessness and the social housing register (formerly the public housing waitlist).

This is mainly due to a lack of data linkage between the housing and homelessness data systems.

SAHT needs to understand how public housing availability impacts the demand for services to inform decisions on the design and funding/capacity of the specialist homelessness services system. A public housing allocation framework would help to ensure public housing is provided to people with greatest need, including those currently experiencing or at risk of homelessness.

SAHT advised us that it engaged an independent consultant in January 2024 to perform detailed analysis of specialist homelessness services client data and public housing allocations data. The consultant will also help to develop a decision-making framework for public housing allocation, taking account of current evidence and data.

4 Program management

4.1 Overview of program management arrangements

A program is an activity or group of activities that contribute to achieving a government policy objective.[44] In the specialist homelessness services sector, these programs are service types (such as short-term and emergency accommodation, assertive outreach for rough sleepers, advice and information, advocacy and living skills development) delivered to meet the SA Government's overall objective of preventing and reducing homelessness.

SAHT is the funder and program manager of specialist homelessness services and has ultimate accountability for ensuring the services are delivered in line with the SA Government's policy parameters and objectives.

SAHT contracts external service providers to provide case management expertise.[n] At an individual client level, it is the responsibility of contracted service providers to design and deliver specialist homelessness services in a way that enables them to identify, assess and respond to the needs of each client who presents to their services.

SAHT also requires service providers to:

- assess client needs at presentation and regularly throughout their service engagement with the client to ensure they understand and are responding to them
- allocate the resources needed to respond to presenting client needs across their contracted responsibilities, including applying appropriate triage and diversionary protocols where demand exceeds capacity.

SAHT does not mandate the specific tools or approaches service providers must use for this.

4.2 Findings and recommendations

4.2.1 There is limited guidance for service providers on service eligibility and prioritisation processes

Recommendation

SAHT should, in collaboration with its service providers, develop and implement guidance to help service providers prioritise their services to ensure resources are allocated to those most in need. This guidance should set out:

- eligibility criteria for services
- the risk assessment approach to be adopted for different client types

[n] Case management is a collaborative process of assessment, planning, facilitation and advocacy for options and services to meet an individual's holistic needs through communication and available resources.

- risk and need classifications and definitions (such as classification of client cohorts and population groups as high, medium and low priority)
- service prioritisation protocols (such as high-level mapping of service responses to client risk and triage classifications).

Further, this guidance should be tailored to the factors that impact each service type.

Once the guidance is implemented, SAHT should update its monitoring and reporting processes to ensure service providers conduct their activities in line with the guidance and clients are referred to all the services they should be based on their assessed risk profile and need.

Finding

Eligibility criteria for specialist homelessness services are unclear

With demand for specialist homelessness services currently above capacity, it is important for services to be prioritised in line with SAHT's expectations and the SA Government's policy parameters and objectives.

Recent changes in the housing market have significantly increased the proportion of clients experiencing first-time homelessness who access specialist homelessness services. Many of them are employed and have long private rental histories.

The NHHA and alliance agreements set out the priority cohorts for homelessness services. Alliances are also required to engage in activities that target people who are homeless or at risk of homelessness, giving priority to people with the most complex needs and at most risk of being unsupported and unsheltered.

We found that there was limited guidance for service providers on service eligibility criteria. Important program decisions about eligibility have largely been left to the discretion of service providers.

Service providers told us:

There needs to be more clarity about who specialist homelessness services are intended to support.

SAHT staff also told us that SAHT needs to define who they are here to help, which in turn will help the services providers to focus their resources.

Given the changing client profile and service capacity constraints, the high-level principles in the NHHA and alliance agreements need more detailed guidance that can be applied to the day-to-day service operations for clients. This includes SAHT collaborating with service providers to clarify whether service providers should be supporting everyone who seeks their services or prioritising people with the most complex needs requiring intensive case management.

There is limited guidance on and oversight of service prioritisation protocols

We found that SAHT has exercised very limited guidance on and oversight of the client risk assessment and service prioritisation processes adopted by service providers. Service providers have developed their own models, tools and approaches to assessing client eligibility, risk and complexity, including triage classifications that drive service responses, with limited guidance from SAHT.

SAHT also performs limited monitoring to ensure the intake processes and assessment tools used by service providers are consistent and clients are referred to all the services they should be based on their assessed risk profile and need.

Services may not be consistently prioritised across the system to those in most need

Given the lack of guidance in the areas discussed, there is an increased risk that specialist homelessness services may not be prioritised and provided to people in most need, or in line with SAHT expectations and SA Government policy. As a result, clients with more complex needs may not receive the intensive case management they require.

Service providers may also adopt inconsistent practices on client service eligibility assessments, risk assessments and triaging. Clients may therefore not receive the same service offerings depending on where they enter the system.

4.2.2 SAHT has limited oversight on how service providers plan to achieve intended outcomes

Recommendation

SAHT should work with service providers to help them prepare theories of change and program logics to explain and describe how their services will achieve intended outcomes. It should provide appropriate training and support to service providers to help build their capability in this area, including suggested tools and templates.

Finding

We found that SAHT has provided limited guidance to service providers on the extent to which they are expected to explain and describe how their services will achieve intended outcomes. For example, it has not provided guidance on whether theories of change and program logic are required for each service.

We also found that theories of change and program logic have not been consistently developed for specialist homelessness services, and that the capability to develop and apply them varies widely across service providers.

A theory of change describes the causal links between the activities, outputs, outcomes and impacts of a program, and the assumptions about these links.[45] The main components of a theory of change are shown in Appendix 3. It can be used to ensure that a service provider delivering a program (a homelessness service in this case) is clear about why they are there and what they hope to achieve. It also helps to identify the set of conditions, activities and processes that contribute to change (for example, improved sustainable housing outcomes for clients).[46]

A good theory of change can help to identify key indicators for monitoring, identify gaps in available data, prioritise additional data collection and provide a structure for data analysis and reporting.[47]

A program logic is another important element of program planning and evaluation because it sets out a graphic and easily understandable relationship between program activities and the intended program outcomes.[48] A template for developing an outcomes-based program logic is provided in Appendix 4.

Without theories of change and program logics for each specialist homelessness service, SAHT lacks clarity on how the services will bring about the desired changes to achieve intended outcomes. This reduces the likelihood that the services will successfully achieve those outcomes.

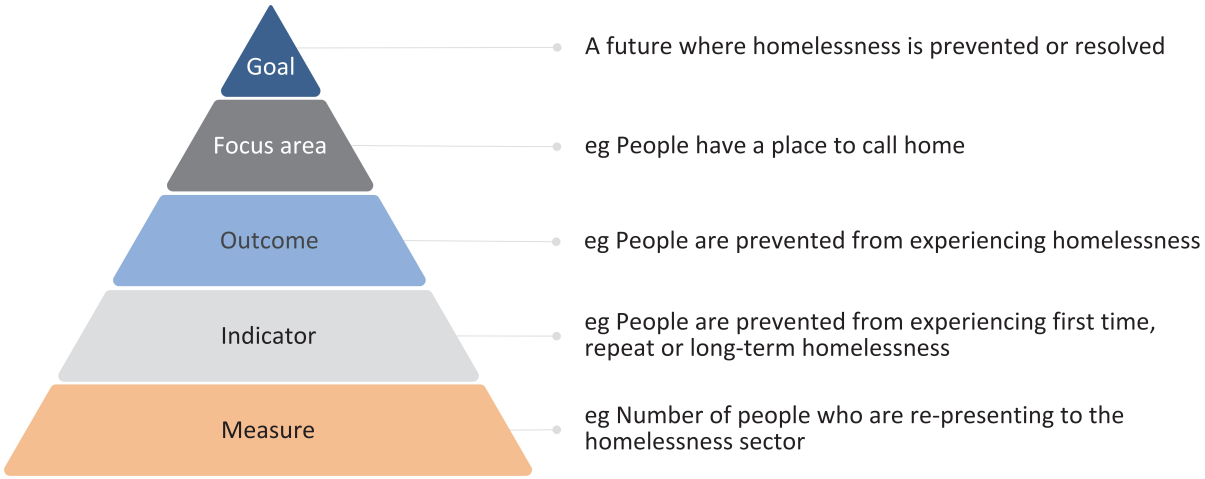
5 Outcomes measurement and monitoring

5.1 Overview of SAHT's outcomes measurement approach

The SAHT Board approved the progressive implementation of the Outcomes Framework in August 2023. The objective of the framework is to ensure outcomes data is actively used to inform strategic actions, including continuous improvement of services and investment decisions. Measuring outcomes will also enable the effectiveness and impact of specialist homelessness services to be evaluated.

The Outcomes Framework will be a key tool for tracking statewide progress against the sector's collective aspiration, or overarching goal, of 'a future where homelessness is prevented or resolved'. It sets out focus areas, outcomes, indicators and measures. Figure 5.1 shows the relationship between these elements.

Figure 5.1: Outcomes Framework hierarchy



SAHT developed key aspects of the Outcomes Framework with assistance from academic consultants in 2023. The framework was informed by targeted research and extensive consultation with stakeholders across the sector. The framework clearly defines targeted system-wide outcomes and corresponding indicators for specialist homelessness services, covering both alliance and directly contracted homelessness services.

Implementing the Outcomes Framework will be a complex and lengthy project. The current draft framework sets out almost 40 indicators and over 100 draft measures for those indicators. Significant work will be needed to build data capacity and quality, upgrade supporting systems and embed an outcomes focus across the sector.

Figure 5.2 details the planned implementation time frames for the Outcomes Framework, as advised to us by SAHT.

Figure 5.2: Planned implementation time frames for the Outcomes Framework

July 2024	Review outcome indicators and measures to confirm data availability and gaps. Prioritise the development of data products for indicators and measures.
December 2024	Prepare supporting documents and tools to support all staff in understanding and using the Outcomes Framework. Data products shared for the first set of prioritised Outcomes Framework measures where data is available.
June 2025	Report on all measures in the Outcomes Framework where data is available and use this data to inform decision making.
June 2026	Use outcomes data to inform continuous improvement activities.
June 2027	Achieve measurable improvement in outcomes for people experiencing or at risk of homelessness.

SAHT also advised us that the Outcomes Framework will inform the design of the next round of contracts for alliance and directly contracted homelessness services. This includes ensuring that performance measures in service contracts align with the Outcomes Framework where appropriate.

5.2 H2H client management system

The Homeless2Home client management system (H2H) was implemented in 2011 for all specialist homelessness services. It was originally required for data reporting to the AIHW under the previous National Affordable Housing Agreement. This agreement was replaced by the NHHA in 2018.

SAHT developed H2H based on the system needs of the Homelessness and Domestic and Family Violence sector at the time. Its key functionality includes:

- standardised reporting to enable the extraction of datasets
- the ability to record client circumstances and case management work
- recording of referrals between agencies
- oversight of client pathways across the sector.

SAHT initiated a Homelessness System Review Project in June 2023. The project seeks to understand internal and external requirements from sector, business, system and technical stakeholders to develop recommendations for a future client management system. This has involved surveying H2H users, and consulting with other stakeholders across the sector and within SAHT.

The project is now complete. SAHT advised us that the review recommended developing a new system, but this had not been approved by the SAHT Board at the time of our audit.

5.3 Findings and recommendations

5.3.1 SAHT has not finalised its outcomes measurement framework

Recommendation

SAHT should develop and approve plans with key deliverables, tasks, timelines and allocated responsibilities to support the implementation and adoption of its Outcomes Framework.

SAHT should continue its work to finalise and implement its Outcomes Framework including:

- finalising the Closing the Gap focus area of the framework in partnership with Aboriginal people
- finalising measures for framework indicators
- finalising the specifications[o] for each framework measure, focusing on establishing baselines[p]
- comparing data currently available against the finalised measures and addressing any data gaps
- prioritising data collection needs to ensure data is collected on the most important measures first
- providing training and guidance to service providers to embed the framework and an outcomes focus across the sector.

Once the framework is finalised and implemented SAHT should:

- start monitoring and reporting on progress against set baselines, trends and targets for each measure
- establish set review points to consider how well the framework is working for the sector.

Finding

We found that SAHT has performed limited outcomes monitoring to date for specialist homelessness services as it has not had the right data and systems.

SAHT recognises this gap and is working to finalise and implement its Outcomes Framework.

[o] The specifications for framework measures include the rationale for each measure, the data source, the baseline and the anticipated trend or target.

[p] Baselines measure conditions at the start of a monitoring period to enable later comparison and the identification of trends.

This framework provides a sound base to work from and demonstrates that SAHT recognises the importance of measuring the impact and effectiveness of its specialist homelessness services in preventing and reducing homelessness.

Implementing an outcomes framework in a sector like specialist homelessness services, with such a wide range of stakeholders and services, is a complex and lengthy process.

We found there is much work to do before SAHT's framework is operational. This includes identifying data sources, establishing baselines and setting targets for all outcomes measures, collecting the required data and using this data to monitor and report on outcomes.

It is critical that SAHT finalise baselines for the framework measures as a priority, as this is the key to assessing whether outcomes improve over time.

Given the broad scope of the draft framework, with over 100 measures in it, SAHT will need to prioritise the collection and reporting of data for the outcomes and measures that are likely to have the biggest impact on achieving the objective of preventing and resolving homelessness.

Further work is also required to finalise the 'Closing the Gap' focus area in the framework, including consulting with Aboriginal people to define and agree outcomes, indicators and measures.

Without outcomes data and an operational outcomes measurement framework, SAHT cannot:

- determine how well its specialist homelessness services are preventing and reducing homelessness at a system-wide (whole-of-state) level
- make data informed strategic decisions on continuous improvement of services and direct investments where they will have the most positive impact.

5.3.2 The existing client management system (H2H) does not meet data requirements

Recommendation

SAHT should develop a business case and seek approval and funding to redevelop H2H in line with the Homelessness System Review Project recommendations. In doing this SAHT should ensure the system:

- effectively supports the implementation of the Outcomes Framework
- actions the system improvements identified through user and sector feedback.

In implementing the Outcomes Framework, updating systems and reviewing data collection requirements, SAHT should consider the administrative burden on service providers and ensure that only relevant data with demonstrable value is required to be collected and recorded.

Finding

To effectively implement its Outcomes Framework, SAHT needs a properly configured system for collecting relevant, timely and reliable specialist homelessness services data. Reporting against the framework will also require qualitative and lived experience data to be collected and analysed for the first time.

We found that H2H needs to be modified to collect this data.

Our review of SAHT's consultation with the sector through the Homelessness System Review Project and our inquiries with SAHT staff highlighted:

- the system does not accurately track performance against some service contract KPIs (eg completion of client risk assessments)
- system reports need greater automation
- the complexity of H2H reduces the time frontline staff have to work with clients
- the overall cost of using H2H (in labour hours across the sector) is not returned to sector stakeholders in terms of valuable data, information or insights.

Service providers told us:

There were a number of areas where the functionality of H2H could be improved including:

- *the reporting tools are not self-service and do not provide live reporting. Users need to wait until the end of the period for reports to be sent to them, which makes timely checks on the validity of data entry difficult*
- *there is no capacity to transfer data between H2H and other systems.*

They also told us that the limitations in H2H's functionality put an administrative burden on service providers which potentially takes resources away from core service delivery.

5.3.3 Value for money assessments are not performed

Recommendation

SAHT should:

- update its Value for Money Statement to clearly describe how the value for money of the SA Homelessness Alliances should be determined and evaluated
- conduct value-for-money assessments of the SA Homelessness Alliances and report on them in line with its Value for Money Statement.

SAHT should also develop and document its approach to measuring and evaluating the value for money of its directly contracted homelessness services. The approach should be proportionate to the value and risk of the service.

Finding

The agreements with the five alliance service providers state that their use of NHHA funding should demonstrate value for money. They indicate that this means achieving the Value for Money Statement included in the agreements.

We found that the Value for Money Statement does not clearly describe how SAHT will measure and evaluate the alliances' value for money. We also found that SAHT has not performed the value-for-money assessments required by the statement and the alliance agreements.

We also found that SAHT has not developed and documented its approach to measuring and evaluating the value for money of its directly contracted homelessness services.

SAHT is therefore unable to demonstrate that its expenditure on specialist homelessness services is achieving value for money.

6 Service contract design and performance management

6.1 Overview of SAHT's service contract performance management approach

SAHT has a contract management policy supported by:

- a contract management framework that sets out the governance arrangements for contract management
- a contract management procedure containing contract management processes and best practice guidance for contract managers.

6.1.1 Homelessness contract performance management guideline

SAHT's approach to contract performance management of its specialist homelessness services is set out in a guideline that explains:

- the approach, methodology and tools to support contract management
- roles and responsibilities for the management and oversight of service provider performance.

6.1.2 Contract management plans

SAHT's contract management procedure requires contract management plans for specific types of contracts. Plans have been prepared for all the homelessness alliance services and almost all directly contracted homelessness services. They identify the contract manager and their responsibilities, including:

- monitoring performance to ensure contract outcomes are achieved
- managing, addressing and escalating contract performance risks
- identifying and addressing opportunities for continuous improvement
- providing reports to internal stakeholders as required (for example, performance reports, contract reports).

6.2 Findings and recommendations

6.2.1 Service contract design does not enable service performance to be effectively assessed

Recommendation

SAHT should, in collaboration with its service providers, review and update its specialist homelessness services contracts to ensure:

- intended outcomes are tailored and specific to the services provided under the contract and align with the Outcomes Framework once it is finalised
- performance measures are established for all outcomes identified
- outcomes and performance measures are relevant and measurable to enable effective performance assessment
- clear measures of success are defined (for example, the number or percentage an outcome is expected to improve by over a specified period compared to the baseline).

SAHT should, in collaboration with its service providers, also regularly review the key result areas (KRAs)[q] and key performance indicators (KPIs) in service contracts to ensure they remain fit for purpose and reflect any changes in client needs, service priorities and the broader operating environment.

Finding

6.2.1.1 Outcomes and performance measures are often not relevant and measurable

We found the following gaps in the design of SAHT's homelessness service contracts:

- The intended service outcomes in several contracts are generic and not specific to the services provided under the contract.[r]
- Performance measures have not been established for every outcome in the service contracts.

We also found that the outcomes and performance measures in many service contracts do not follow SMART principles.[s] They:

- do not include enough information to understand what success looks like. Many of the outcome statements are written using terms such as 'fewer…', 'increased…', 'improved…', 'better…', without stating the baseline to be used and level or amount of change expected/desired
- do not detail how the outcome will be measured or the time frame to achieve the outcome.

These gaps in service contract design increase the risk that the outcomes SAHT is seeking from its specialist homelessness services are unclear. As a result, specialist homelessness services may not be designed to meet SAHT's intentions. In addition, SAHT may not be able to effectively assess whether the intended outcomes for each contracted homelessness service are being achieved and hold service providers accountable for their performance.

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[q] The alliance agreements describe KRAs as the qualitative strategic factors that contribute to achieving the alliance outcomes.

[r] As an example, 7 of the 20 directly contracted homelessness service contracts have the same client and community outcomes, with no service-specific outcomes identified despite the services being fundamentally different (for example, boarding house services compared to ex-custodial services).

[s] A SMART outcome is specific, measurable, achievable, relevant and timebound.

6.2.1.2 KRAs and KPIs in service contracts are not regularly reviewed to ensure they remain current and relevant

We found that SAHT did not regularly review the KRAs and KPIs in its homelessness service contracts to ensure they remain current and reflect any changes in client needs and service priorities.

Service providers told us:

KPIs and KRAs in service contracts need to be reviewed and updated, as some were:

- *outdated and unrealistic in the context of the current operating environment of severe housing shortages and increased demand for specialist homelessness services*
- *not fit for purpose and not aligned with the core objectives of the services.*

It is important to regularly review these KPIs and KRAs to ensure:

- they remain current and are the best indicators for measuring homelessness service provider performance
- time and resources are not spent collecting, monitoring and reporting data that is outdated and irrelevant.

6.2.2 Gaps in key areas of contract performance management

Recommendation

SAHT should:

- hold regular performance meetings with directly contracted homelessness service providers to give them timely feedback and promptly inform them of any performance issues
- conduct performance contract reviews in line with SAHT procedures
- ensure service providers develop and implement corrective action plans for all areas where performance targets for KPIs have not been achieved
- establish processes to measure and report on KRAs in alliance agreements
- develop an evaluation plan for individual specialist homelessness services, prioritising the evaluation of services based on their value, strategic importance, risk and complexity.

Finding

We found gaps in key areas of SAHT's contract performance management processes at the time of our audit, including that:

- contract performance management focused on monitoring service outputs and activity rather than the outcomes in the service contracts

- no processes were established to measure and report on KRAs in homelessness alliance agreements
- performance meetings were not occurring regularly for directly contracted homelessness services and as a result these service providers were often not aware of how they were tracking against SAHT's performance expectations
- the contract reviews for directly contracted homelessness services required by SAHT procedures, including those to support contract extensions, had not been performed
- corrective action plans were not in place for some KPI targets that were not achieved. Corrective action plans help to identify the cause of performance issues and define the actions to be taken to improve performance. They also set clear expectations between SAHT and providers on the need for performance improvement.

Given these gaps, service provider performance issues may not be identified and actioned promptly. This increases the risk of poor service performance, intended outcomes not being achieved and clients not receiving the support they need.

We also found that there was limited formal evaluation[t] of individual homelessness service impacts. These evaluations would help SAHT better understand whether services are implemented as planned and delivering intended outcomes and benefits. They can also help to identify potential opportunities to improve the design and delivery of services and to support decisions on whether to continue, expand, cease or change a service.

[t] SAHT defines a formal evaluation as a rigorous, systematic and objective process to assess a program's effectiveness, efficiency, appropriateness and sustainability. Evaluations are commonly undertaken to measure the impacts and outcomes of a program and to reflect on its processes. They are usually performed by an independent party.

7 Governance and oversight of services

7.1 Findings and recommendations

7.1.1 Alliance System Steering Group (ASSG) has not effectively overseen the specialist homelessness services system

Recommendation

SAHT should establish its proposed new sector governance group to replace the lapsed ASSG as soon as practical. The new group should:

- oversee the delivery of services across the system and provide advice and recommendations to SAHT on:
  - consistency in service practices
  - minimising service duplication and overlap
  - coordinating activities and initiatives
  - sharing lessons and innovation opportunities
  - risks and issues impacting the services
- monitor the homelessness service sector's performance in achieving the system-wide outcomes for specialist homelessness services set out in the Outcomes Framework and respond to identified performance trends as appropriate.

The new sector governance group's objectives, roles, responsibilities and membership should be clearly documented and agreed in terms of reference, including its responsibilities for both alliance and directly contracted homelessness services.

Finding

An effective governance oversight body for the specialist homelessness services system is needed to ensure that SAHT and the sector have shared visibility and accountability over the achievement of the system's intended outcomes.

To support the implementation of the alliance services delivery model in 2021, an ASSG with senior representation from SAHT and each alliance was established. Its key roles included:

- monitoring whole-of-system performance in achieving outcomes
- facilitating cross-partnership capacity and capability building, including commitment to alliance behaviours
- helping to build common operational practices and systems.

We found that when the ASSG was operating, it did not receive reports or other information to help it monitor whole-of-system performance in achieving intended outcomes.

SAHT held a planning workshop in July 2022 to reset the purpose and course of the ASSG. At the workshop, consensus was reached that the ASSG was not appropriately constituted to meet the sector's needs. ASSG meetings were cancelled pending the development of a new model for the ASSG.

We found that as the ASSG had not met since July 2022 there has been no governance group to oversee the sector.

SAHT advised us that it plans to establish a new sector group to replace the ASSG and that the new group will consider the collective outcomes of the homelessness sector described in the Outcomes Framework.

7.1.2 Limited reporting to SAHT's Board and Executive on specialist homelessness services performance

Recommendation

SAHT should provide ongoing reporting to its Board and Executive on specialist homelessness services performance, including:

- performance against the performance measures established to assess whether SAHT's system-wide outcomes for specialist homelessness services are being achieved
- performance against KPIs and other metrics included in funding agreements
- trends in unmet need and implications for service delivery and funding.

SAHT should also ensure the performance information it provides to its Board and Executive is timely.

Finding

Those responsible for governance of SAHT have an important role in ensuring that its specialist homelessness services are effectively implemented and achieving intended outcomes. Timely, accurate and useful reporting to governance groups is important to enable them to:

- effectively monitor specialist homelessness services outcomes, analyse performance trends and understand key risks and issues impacting the services
- make timely and well-informed operational and financial decisions on specialist homelessness services.

We found that there was limited reporting to SAHT's Board and Executive on the performance of specialist homelessness services at the time of our audit. The reporting that was provided is summarised below:

- before May 2023, there was no regular reporting on the performance of specialist homelessness services

- from May 2023, a monthly corporate performance report that included limited statistical information and reporting against two specialist homelessness services performance measures
- from November 2023, a specialist homelessness sector quarterly performance report was provided.

There is scope to improve the quarterly performance report by:

- more timely reporting of homelessness alliance system performance. Currently alliance system performance is reported nearly five months after the relevant period
- reporting the State's performance for all the homelessness KPIs in South Australia's NHHA bilateral schedule. Currently only three of the four KPIs are included at an individual alliance level
- reporting on unmet need for specialist homelessness services, including trends
- reporting against the performance measures established to assess whether SAHT's system-wide outcomes for specialist homelessness services are being achieved.

We also found that SAHT did not report to its Board and Executive on performance in achieving the client and system outcomes in the Future Directions for Homelessness strategy.[u]

7.1.3 Coordination with other government agencies to achieve intended outcomes could be improved

Recommendation

SAHT should consider engaging with other relevant SA Government agencies to:

- explore opportunities to share data sets for outcomes measurement purposes and better understand the inflows of clients into specialist homelessness services
- clarify respective responsibilities and accountabilities for outcomes in the Outcomes Framework
- set up a cross-agency governing body focused on overseeing strategies to achieve the outcomes in the Outcomes Framework.

Finding

Several SA Government agencies provide support services that may help to prevent and reduce homelessness, including mental health, drug and alcohol, domestic and family violence and correctional services.[v]

[u] The outcomes in the Future Directions for Homelessness strategy will be replaced by the Outcomes Framework which is still being finalised and implemented. Section 5.1 discusses the Outcomes Framework.

[v] Section 2.1.2 discusses the causes of homelessness, including system failures.

We found there are opportunities for better cross-sector collaboration in working towards achieving the outcomes in the Outcomes Framework. This includes SAHT more actively engaging with other relevant agencies to better understand interdependencies and measure outcomes, identify prevention strategies and limit the inflows of people into homelessness.

SAHT advised us that it is working with the sector to improve the connection between other services and specialist homelessness services by establishing new homelessness system governance, including the new sector governance group discussed in section 7.1.1. SAHT is proposing to invite community housing providers, peak bodies, other government agencies and subject matter experts to the new group where appropriate.

Appendix 1 – Audit mandate, objective and scope

Our mandate

The Auditor-General has authority to conduct this audit under section 31(2) of the *Public Finance and Audit Act 1987*.

Our audit objective

We assessed whether SAHT effectively manages its provision of specialist homelessness services.

What we audited and how

We considered the following sub-objectives in performing our audit:

- Is there an effective process to identify and prioritise the service needs of people who are homeless or at risk of homelessness?
- Have the objectives, outcomes and success measures for specialist homelessness services been effectively defined?
- Is there a strategy that outlines how specialist homelessness services will meet identified needs and achieve outcomes?
- Are there effective processes for designing the individual specialist homelessness services delivered by homelessness service providers?
- Have effective outcome performance measures been defined and effective processes established to collect relevant and reliable information to measure homelessness service outcomes?
- Is there effective oversight and performance monitoring of homelessness service providers to ensure their contracted performance outcomes are achieved?
- Is there effective performance monitoring and evaluation of the achievement of SAHT's system-wide objectives and outcomes for specialist homelessness services?

Our assessment was based on evidence we obtained from a range of sources and methods. We made inquiries with SAHT staff responsible for managing specialist homelessness services and the academic consultant engaged by SAHT to help develop and implement its Outcomes Framework. We also interviewed four specialist homelessness services providers to get their views on SAHT's management of specialist homelessness services. We reviewed:

- strategic plans related to specialist homelessness services
- the Outcomes Framework
- SAHT contract management policies, procedures and frameworks for specialist homelessness services
- contracts for providing specialist homelessness services
- H2H and AIHW data on specialist homelessness services
- reporting provided to SAHT governing bodies on specialist homelessness services.

What we did not audit

The following areas were outside the scope of our audit:

- the design and implementation of the SA Government's Our Housing Future 2020-2030 strategy, as this captures the State's whole housing strategy and is broader in scope than specialist homelessness services
- the Emergency Accommodation Program managed by SAHT, as this is not a specialist homelessness service
- the State's compliance with the NHHA reporting requirements
- procurement of specialist homelessness services
- financial acquittals for homelessness service contracts.

Our audit does not conclude on the actual extent to which specialist homelessness services have prevented or reduced homelessness.

Appendix 2 – Specialist homelessness services delivery models

Homelessness alliances

On 1 July 2021, SAHT implemented an alliance model for delivering most of its specialist homelessness services. Under this model, SAHT and service providers aim to work together to deliver outcomes, with collective ownership of opportunities and responsibilities and shared decision making.

Service providers joined together to form five alliances consisting of two metropolitan Adelaide and two country alliances, and a statewide domestic and family violence alliance. Figure A2.1 shows the service providers/sector participants for each alliance and a map of the area covered by the metropolitan Adelaide and country alliances.

Figure A2.1: South Australian homelessness alliances

Toward Home

- Lutheran Care (lead)
- Baptist Care SA
- Mission Australia
- The Salvation Army (SA)
- Sonder Care
- Aboriginal Family Support Services
- Hutt Street Centre

Adelaide North-West

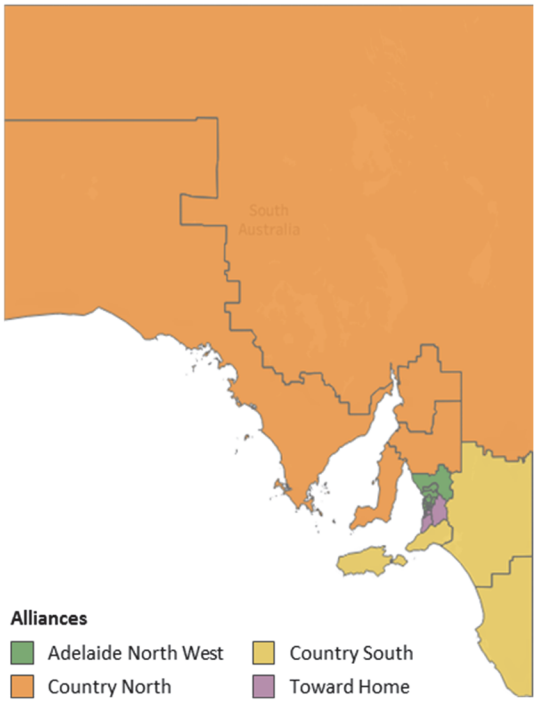
- Uniting SA (lead)
- Aboriginal Sobriety Group Indigenous Corporation
- Anglicare SA
- Centacare Catholic Family Services
- St John's Youth Service
- The Salvation Army (SA)
- Uniting Communities

Country South

- Anglican Community Care (lead)
- Junction Australia
- Pangula Mannamurna Aboriginal Corporation
- Moorundi Aboriginal Community Controlled Health Service

Country North

- Uniting Country SA (lead)
- Centacare Catholic Country SA
- Centacare Catholic Family Services
- The Salvation Army
- West Coast Youth and Community Support



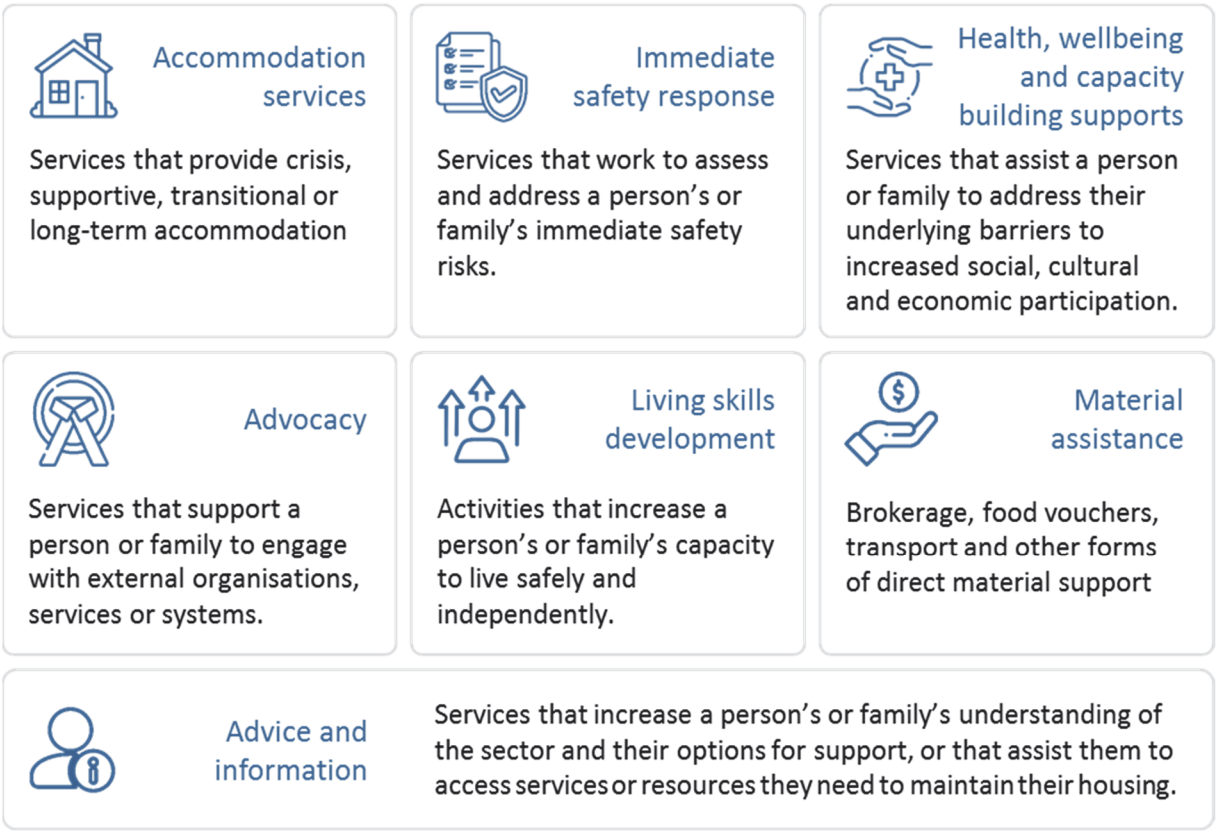
Statewide Domestic and Family Violence

- Women's Safety Services SA (lead)
- Centacare Catholic Country
- Centacare Catholic Family Services
- Junction Australia
- Nunga Mi:Minar Inc
- The Salvation Army (SA)
- Uniting Country SA
- Yarredi Services

The initial term of the alliances was two years, with the option to extend for two further two-year terms (that is, a possible six years in total). In May 2023, the alliance agreements were extended for two years to 30 June 2025.

Figure A2.2 provides a summary of the services provided by the alliances.

Figure A2.2: Summary of services provided by the South Australian homelessness alliances



Source: Alliance Management Framework.

Directly contracted homelessness services

SAHT contracts some specialist homelessness services outside of the alliance model. These directly contracted homelessness services, shown in figure A2.3, fall into two categories:

- services that have a broadly based geographic focus, either statewide or operating across metropolitan Adelaide. These services do not have a strong alignment with any specific region and often have specific service models linked to and supported by purpose-built properties
- services that had existing contracts with an end date after 30 June 2021 (the start date of the alliance agreements) or have funds applied on an as-needed basis.

Figure A2.3: SAHT's directly contracted homelessness services at 31 March 2024

All people

Housing Choices South Australia	Provision of services for Common Ground
Uniting Communities	Provision of the Homelessness Gateway
Adelaide City Council	Provision of services for the Homeless and Vulnerable project

Women and children experiencing domestic and Aboriginal family violence

People homeless or at risk of homelessness

Uniting Country SA	Provision of services for Coober Pedy Homelessness and Domestic and Aboriginal Family Violence Service

Women and children experiencing domestic and Aboriginal family violence

Ngaanyatjarra Pitjantjatjara Yankunytjatjara Women's Council	Provision of services for NPY Women's Council Domestic and Family Violence Service

Women over 18

Catherine House	Provision of Catherine House supported accommodation service

Young people and children

Uniting Communities	Provision of services for Therapeutic Youth Service – Metropolitan and Mount Gambier
Anglicare SA Housing	Provision of services for Youth 110 (Youth Crisis Service)
Kids Under Cover	Provision of fully relocatable studios to young people in South Australia who are at risk of homelessness, as part of the homelessness prevention fund initiative
Catholic Family Services	Provision of services for Young Family Support Program
Relationships Australia South Australia	Provision of services for child focused support

Adults

Unity Housing Company	Provision of services for The Terrace Boarding House
Unity Housing Company	Provision of services for The Terrace Boarding House liaison worker
St Vincent de Paul Society (SA)	Provision of in-reach and outreach liaison services for men accommodated within the St Vincent de Paul Men's Crisis Centre, people at risk of exiting institutional care into homelessness, and others experiencing or at risk of homelessness
Hutt Street Centre	Provision of the Aspire program

People exiting custodial settings

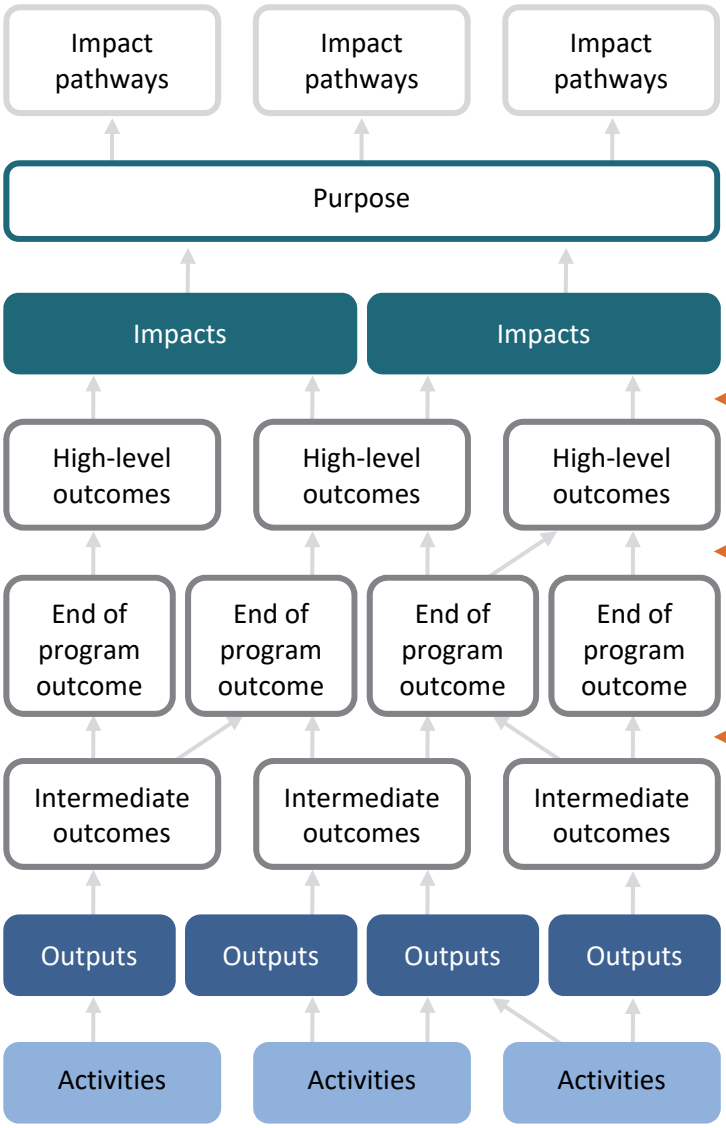
Offenders Aid and Rehabilitation Services of SA	Provision of services for Ex-Custodial Homelessness Support Service
SYC	Provision of services for Integrated Housing Exits (Youth Justice)

Other

Uniting Communities	Provision of services for extreme weather response brokerage service
SYC	Provision of housing advice, advocacy and engagement service
Australian Alliance to End Homelessness	Provision of Specialist Coaching and Implementation Support in the Advance to Zero Methodology

Appendix 3 – Theory of change: main components

Figure A3.1: Main components of a theory of change[49]



Other components

Causal logic:
Describes the how and why between each step in the theory of change

Assumptions:
Factors outside of the program/service control necessary to ensure program/service success

Indicators:
The markers of accomplishment that can be used to measure the success of the program/service (ie did the program/service contribute to a certain outcome)

Actors:
The people who are crucial to a program/service

Impact pathways:
The pathways through which the program/service is expected to contribute to change

Purpose:
The overall goal/aim of the program/service. It explains the reasons the program/service exists

Impacts:
The top-level changes that result wholly or partly from the outcomes to which the program /service contributed

High level outcomes:
The long-term outcome the program/service is aiming to achieve.

The other outcomes in the theory of change are preconditions necessary to achieve the high-level outcomes

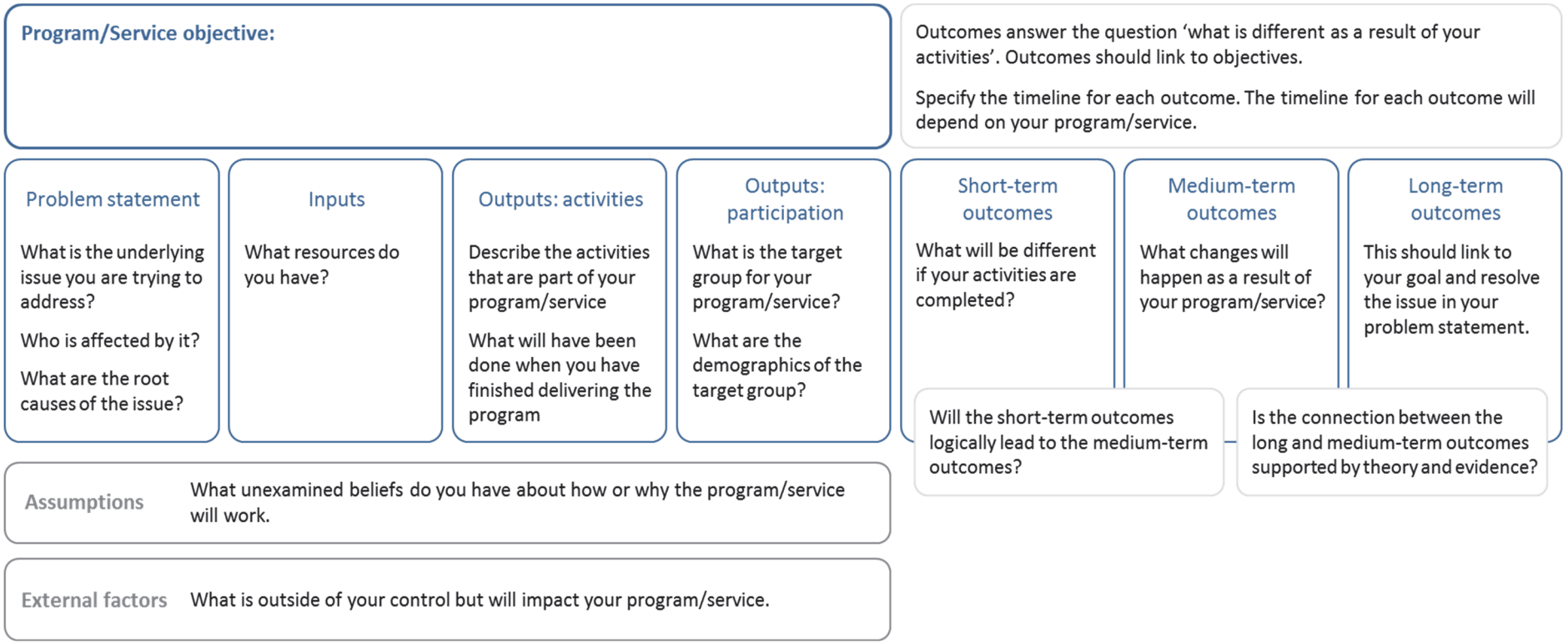
Causal logic and underlying assumptions = the how and why between each step

Outputs:
The products/services that the program/service will create through the activities.

Activities:
The actions that will be taken by the program/service that are expected to contribute to change.

Appendix 4 – Program logic template

Figure A4.1: Outcomes-based program logic template[l]



Appendix 5 – Response from the Department of Human Services

OFFICIAL

Government of South Australia

human services

DHS Ref: 24BCEO/0177
Your ref: A23/506

Office of the Chief Executive
Level 8 North
Riverside Building
North Terrace
Adelaide SA 5000

GPO Box 292
Adelaide SA 5001

DX115

Tel: 08 7424 5980
Fax: 08 8413 9002

ABN 11 525 031 744

Mr Andrew Blaskett
Auditor-General
Audit Office of South Australia
By email: records@audit.sa.gov.au

Dear Mr Blaskett

Thank you for your letter of 18 July 2024 sending me a copy of your proposed Report 8 of 2024 *Managing homelessness services* (proposed report), and providing me, as Chief Executive of the Department of Human Services (DHS), with an opportunity to respond to the proposed report.

Thank you for the time and effort that your office has spent on the review and in developing the proposed report. I view such reports as an opportunity for improvement and a valuable resource when considering the direction of reform.

As you note in your letter, DHS is the new agency with responsibility for homelessness services, this function having transferred to us from the South Australian Housing Trust (SAHT) pursuant to Machinery of Government changes, on 1 July 2024.

Specifically, the Machinery of Government changes transferred to DHS specialist homelessness services contracts related to the five homelessness Alliances and specified directly contracted services, as well as responsibility for homelessness policy. Housing services and programs such as emergency or transitional accommodation, the Integrated Housing Exits Program, and other linkages to housing supply and housing policy that play a contributing role to the broader ecosystem and operation of the sector as a whole remain with the SAHT. SAHT also retains responsibility for the new National Agreement on Social Housing and Homelessness (NASHH).

As your review occurred during the period when the SAHT held responsibility for homelessness services, DHS has taken advice from the SAHT as to the development of the Alliance model for delivery of specialist homelessness services and we note their response to your recommendations, reflected in section 1.5 of the proposed report.

DHS acknowledges and supports the collaborative approach to addressing homelessness issues, which is fundamental to the Alliance model. We look forward to strengthening our own partnerships with the five Homelessness Alliances, and to supporting their growth and maturity over time, recognising that this approach to service delivery is very much in its initial growth stages.

We will also be looking to develop stronger collaborative ways of working with the directly contracted services, and with the specialist homelessness sector.

DHS notes the SAHT response identifies improvements and workstreams that it had been progressing to embed certain operational contract management practices which are in strong alignment with your recommendations. These include implementation of the Outcomes Framework, considering options following the H2H system review, strengthened governance and sector advisory mechanisms, opportunities for integration and alignment following a service mapping review of directly contracted services, and a workplan of practice improvements.

As DHS now has responsibility for any next steps in regard to these identified improvements and workstreams, we will give careful consideration to the work done by SAHT to date and the recommendations in your proposed report, once finalised, to inform our decisions and strategic approaches.

We will also be working closely with the Homelessness Alliances, directly contracted homelessness services and other sector partners and stakeholders to resolve responses to your proposed report.

There will be ongoing monitoring of both sector outcomes along with the Outcomes Framework itself to inform future strategic directions and contracting arrangements, amongst other matters.

DHS is itself developing an Outcomes Framework with human service providers and key stakeholders. I anticipate that we will, in considering the next steps in the implementation of the Homelessness Outcomes Framework, also aim for at minimum alignment, if not integration, of the Homelessness Outcomes Framework with the wider DHS Outcomes Framework for consistency, efficiency and stronger cross sector approaches.

We will similarly seek alignment and synergies with other DHS priorities, initiatives, strategic approaches, and future directions, and be guided by wider government priorities, obligations and strategic direction in our approach to managing homelessness services.

While the Alliances and directly contracted homelessness services are contracted by the South Australian Government, significant sector funding was drawn from the former National Housing and Homelessness Agreement, which transitioned to the NASHH from 1 July 2024. The NASHH is expected to run for five years and provides an opportunity to consider medium and longer-term arrangements in the homelessness sector.

Longer-term strategic planning in the local homelessness sector will also benefit from the completion of the new National Housing and Homelessness Plan that is currently being finalised between all jurisdictions and aims to deliver a 10-year strategy.

A review of longer-term strategy will also provide the opportunity to consider other matters raised in the proposed report, including the most suitable measurements of met and unmet demand along with resourcing to address these.

As noted in the proposed report, homelessness is about a lot more than the lack of a home. It is often caused or accompanied by family crises, health or disability issues, sudden economic shocks and factors outside the control of those who find themselves in need of assistance. The Alliances and directly contracted homelessness services developed important relationships with other parts of government and the community service sector while under the responsibility of the SAHT and we expect to expand and grow those connections under the stewardship of DHS.

DHS and SAHT have been working together to ensure the smooth transition of the Homelessness function to DHS, and DHS will also continue to maintain and embed cross agency collaboration, leadership and management with the SAHT as a critical partner in supporting the homelessness system. In time, we will grow this collaboration to include other relevant inter agency partners.

The need for sector wide governance mechanisms has also been raised with us by stakeholders and is a matter we are considering as a matter of priority.

Thank you for sharing the proposed report with me, it provides a valuable insight into the management of the homelessness services in South Australia.

Yours sincerely

Sandy Pitcher

Sandy Pitcher
CHIEF EXECUTIVE

26 / 07 / 2024

Appendix 6 – Abbreviations and terms used in this report

Term	Description
ABS	Australian Bureau of Statistics
AIHW	Australian Institute of Health and Welfare
Alliance agreements	Agreements between SAHT and specialist homelessness services agencies that implement an alliance model to deliver a range of specialist homelessness services within a defined geographic region.
Alliance Management Framework	Forms part of the alliance agreements and provides detailed guidance to support the operation of the alliance governance structures. It sets out the process for joint management of alliance activities by alliance participants. It defines roles, key accountabilities, responsibilities and operations, and protocols.
ASSG	Alliance System Steering Group
At risk of homelessness	The Specialist Homelessness Services Collection considers a person is at risk of homelessness if they are at risk of losing their accommodation or experiencing one or more of a range of factors or triggers that can contribute to homelessness.
Baseline	Measures conditions at the start of a monitoring period to enable later comparison and the identification of trends.
Case management	A collaborative process of assessing, planning, facilitating and advocacy for options and services to meet an individual's holistic needs through communication and available resources.
Client	A person who receives a specialist homelessness service. The person must directly receive a service and not just be the beneficiary of a service. Children who present with an adult and receive a service are clients. Children of a client or other household members who present but do not directly receive a service are not considered to be clients.
Contract review	An assessment of a contract to determine whether: • it continues to deliver value for money • there is opportunity for improvement and/or innovation.
Corrective action plan	Identifies the actions/strategies to be taken to address the cause of a contract performance issue.
Directly contracted homelessness services	Specialist homelessness services contracted by SAHT outside of the homelessness alliances.
Future Directions for Homelessness	Sets out the strategy to implement South Australia's homelessness alliance reforms.

Term	Description
Homelessness	The Australian Bureau of Statistics defines homelessness as: *When a person does not have suitable accommodation alternatives, they are considered homeless if their current living arrangement:* • *is in a dwelling that is inadequate* • *has no tenure, or if their initial tenure is short and not extendable, or* • *does not allow them to have control of, and access to space for social relations.* For the purpose of the Specialist Homelessness Services Collection a person is defined as homeless if they are living in either: • non-conventional accommodation or sleeping rough • short-term or emergency accommodation due to a lack of other options.
Housing affordability stress	Housing affordability stress as a reason for seeking assistance from specialist homelessness services refers to where the current rent is too high or the client is having difficulty meeting mortgage repayments, creating stress with general living expenses.
Housing crisis	Housing crisis as a reason for seeking assistance from specialist homelessness services refers to an instance where a client has been formally evicted or asked to leave their previous accommodation.
Housing stress	Lower income households that spend more than 30% of gross income on housing costs. Housing stress is a risk factor for homelessness.
H2H	Homeless2Home client and case management system
Individual risk factors	Events or behaviour associated with a higher risk of entering homelessness or facing difficulties in exiting from homelessness.
KPI	Key performance indicator – quantitative metric used to measure the level of performance of contracted activities.
KRA	Key result area – qualitative strategic factor contributing to the achievement of the alliance outcomes.
Long-term housing	Accommodation that is generally provided for three months or more with the expectation that it will be ongoing. Includes long-term, independent housing such as public housing, community housing, private rental accommodation and owner-occupied housing.
Measures of success	The targets that need to be achieved for a system, program, service or activity to be considered successful.
Medium-term and transitional housing	Accommodation that is not expected to be ongoing. That is, when the person first receives this accommodation the intention is that the accommodation will be provided to support the person's transition to more permanent accommodation.

Term	Description
Medium-term and transitional housing *cont'd*	Transitional housing refers to when a client is paying money to occupy accommodation for transition towards independent living or towards returning home.
NHHA	National Housing and Homelessness Agreement – an intergovernmental agreement between the Commonwealth, State and Territory Governments on housing and homelessness.
Our Housing Future 2020–2030	South Australia's housing, homelessness and support strategy.
Outcome	The positive changes that happen because of the program, service or activity being delivered.
Outcome indicators	Measurable markers that show whether progress is being made to achieve a particular outcome.
Outcomes Framework	The SA Homelessness Outcomes Framework currently being developed by SAHT to provide a foundation for strategic, data-informed decision making and service reform across the homelessness sector.
Outcome performance measures	A quantification that provides objective evidence of the degree to which a performance result relating to an outcome is occurring over time.
Outcome statements	Statements that describe the change or positive benefit sought from a program, service or activity being delivered.
Program	An activity or group of activities performed to contribute to the achievement of a government policy objective (for example, a homelessness service).
Program logic	A visual representation that describes how a program/service is intended to work by linking activities with outputs and short, medium and longer-term outcomes.
Public housing	Housing provided and managed by State and Territory Governments.
SA homelessness alliances	The five alliances established in South Australia to deliver specialist homelessness services.
SAHT	South Australian Housing Trust
Service contract	Agreement between SAHT and a specialist homelessness services agency to deliver specialist homelessness services.
Short-term and emergency accommodation	Includes: • refuges • crisis shelters • couch surfing • living temporarily with friends and relatives • insecure accommodation on a short-term basis • emergency accommodation (for example in hotels, motels).
SMART principles	Specific, measurable, achievable, relevant and timebound.

Term	Description
Social housing	Subsidised rental housing provided by non-government organisations or government organisations to help people who are unable to access suitable accommodation in the private rental market. It comprises public housing, which is delivered by SAHT in South Australia, and community housing, which is delivered by non-government organisations.
Specialist homelessness services	Assistance provided by a specialist homelessness agency to a client aimed at responding to or preventing homelessness.
Specialist homelessness services agency (provider)	An organisation that receives government funding to deliver specialist homelessness services to a client.
Specialist Homelessness Services Collection	Data collection from specialist homelessness agencies across Australia that are funded under the NHHA. The Specialist Homelessness Services Collection provides information on the specialist homelessness services received and outcomes achieved for clients.
Specialist homelessness services system	Specialist homelessness services for the whole State, specifically all alliance and directly contracted homelessness services taken together.
Structural risk factors	The economic and societal issues that increase the risk of people experiencing homelessness or facing difficulties in exiting from homelessness.
Support period	The period a client receives services from a specialist homelessness services provider. It starts on the day a person becomes a client by receiving a direct service from the service provider and ends on the last day the services are provided. A support period ends when: • the relationship between the client and service provider ends • the client has reached the maximum amount of support the service provider can offer • the client has not received any services for a whole calendar month and there is no ongoing relationship.
System failures	Failures in support and service systems to prevent someone from experiencing homelessness.
System-wide outcome	Outcomes that the specialist homelessness services system as a whole aims to achieve. This contrasts with service contract outcomes, which reflect the service-specific outcomes service providers are required to achieve under their individual service contract.
Theory of change	Explains how the activities undertaken by an intervention (such as a project, program or policy) contribute to a chain of results that lead to the intended or observed impacts.
Unassisted requests for services	Instances where a person seeks services from a specialist homelessness services agency and does not receive any service.
Unmet need	Instances where a client is assessed as needing a service by a service provider, but the assistance required cannot be provided directly by that service provider or an alternative support service through referral.

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